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EXAMINER



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SECRETARY OF STATE

COVER LETTER

To:

Registration Section Division of Corporations

SUBJECT: 1101 Himes, LLC	
	imited Liability Company
The enclosed Articles of Organization and fee(s)	are submitted for filing.
Please return all correspondence concerning this	matter to the following:
Darren Howard	Name of Person
	Name of Ferson
551 Properties, LLC	
	Firm/Company
275 Bayshore Blvd #1203	
	Address
Tampa, FL 33606	
	City/State and Zip Code
info@551properties.com E-mail address: (to be u	sed for future annual report notification)
For further information concerning this matter, pl	lease call:
Darren Howard	at (813) 919-8237
Name of Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount	t:
\$125.00 Filing Fee & Certificate of Status	
Mailing Address Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Clifton Building

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

£**9**9

The name of the Limited Liability C	Company is:	
1101 Himes, LLC		
(Must end with the words	"Limited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
	ess of the principal office of the Limited Liability Co	mpany is:
		,
Principal Office Address:	Mailing Address:	
275 Bayshore Blvd #1203	275 Bayshore Blvd #1203	
Tampa, FL 33603	Tampa, FL 33606	
(The Limited Liability Company cannot serve as business entity with an active Florida registration.) The name and the Florida street addresses and the Florida street addresses and the Florida street.	ress of the registered agent are:	
Chelsea Martin	<u>lez</u>	5 71
	Name ASA	LA. STANFE
275 Bayshore B	Blvd #1203 #1203	
Flor	rida street address (P.O. Box NOT acceptable)	
Tampa	rida street address (P.O. Box NOT acceptable) FL33606 City, State, and Zip	
· · · · · · · · · · · · · · · · · · ·	City, State, and Zip	₽
liability company at the place des registered agent and agree to act in a statutes relating to the proper and accept the obligations of my posi	gent and to accept service of process for the above states ignated in this certificate, I hereby accept the appointment this capacity. I further agree to comply with the provise complete performance of my duties, and I am familiar sition as registered agent as provided for in Chapter 608 Agent's Signature (REQUIRED)	nent as sions of all with and
	(CONTINUED)	

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	551 Properties , LLC 275 Bayshore Blvd #1203 Tampa, FL 33606
······································	
(Use attachment if necessary)	
RTICLE V: Effective date, if other than the fan effective date is listed, the date must or 90 days after the date of filing.)	he date of filing: (OPTIONAL) t be specific and cannot be more than five business days price
REOUIRED SIGNATURE:	_ 2 /2

Signature of a member or an authorized representative of a member.

(In accordance with section 608-408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)