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DIVISION OF CORPORATIONS

T. HAMPTON
DEC - 9 2010



COVER LETTER

TO: Registration Section Division of Corporations	•
SUBJECT: 365 Main Street LLC	
	ted Liability Company
The enclosed Articles of Organization and fee(s) are	submitted for filing.
Please return all correspondence concerning this ma	tter to the following:
Javier Avila	
	Name of Person
	Firm/Company
205 Lagoon Drive	
	Address
Palm Harbor, Florida 34683	
ci tinamarieavila@hotmail.com	ty/State and Zip Code
	for future annual report notification)
For further information concerning this matter, pleas	se call:
Tina Marie Avila	_at (727) 642-2523
Name of Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	
S125.00 Filing Fee \$\int\\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE	Ī	-	N	8	m	e:
CT1	^	. •		•		

The name of the Limited Liability Company is:

365 Main Street LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

r fincipal Office Address:	<u>Maning Address:</u>
205 Lagoon Drive	205 Lagoon Drive
Palm Harbor, Florida	Palm Harbor, Florida
34683	34683

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

John Free	eborn
	Name
360 Mo	nroe Street
	Florida street address (P.O. Box NOT acceptable)
Dunedin	_{FL} 34698-5740
	City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

SEURETARY OF STATE
DIVISION OF CORPORATIONS

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

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

<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Membe	er
MGR	Javier Avila
	205 Lagoon Drive
	Palm Harbor, FL 34683
MGR	Tina Marie Avila
	205 Lagoon Drive
	Palm Harbor, FL 34683
***************************************	**************************************
	
(Use attachment if necessary)	
ARTICLE V: Effective date, if other th	nan the date of filing: (OPTIONAL)
	nust be specific and cannot be more than five business days prior
to or 90 days after the date of filing.)	
	//
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	\(\frac{10}{10}\)
	(7
Signature of a	member of an authorized representative of a member.
(In accordance with sec	tion 608.408(3), Florida Statutes, the execution of this document
constitutes an affirmation	on under the penalties of perjury that the facts stated herein are true.
I am aware that any fals	se information submitted in a document to the Department of State ee felony as provided for in s.817.155, F.S.)
	Λ -
	Javier Avila
	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)