

L10000131650

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

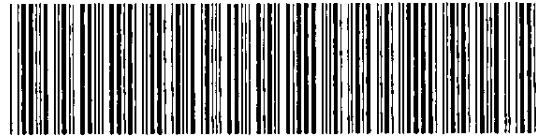
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:  
*Walker*

Office Use Only



200189044312

12/28/10--01014--019 \*\*130.00

RECEIVED  
10 DEC 28 PM 12:14  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
2010 DEC 28 PM 12:27  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

J. SAULSBERRY  
EXAMINER

DEC 28 2010

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Nathie A Williams LLC  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gary Middleton  
Name of Person

Nathie A Williams LLC  
Firm/Company

3028 Elmwood Rd  
Address

Tallahassee, FL 32317  
City/State and Zip Code

g.middle@comcast.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gary Middleton at ( 850 ) 878-0020  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☒ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 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

STATE OF FLORIDA  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL 32301

2018 DEC 28 PM 12:27

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

Nathie A. Williams 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:

#### Principal Office Address:

#### Mailing Address:

Nathie A. Williams LLC

3028 Elmwood Rd  
Tallahassee FL

(32317)

### 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:

Gary M. Ledford

Name

3028 Elmwood Rd

Florida street address (P.O. Box **NOT** acceptable)

Tallahassee FL 32317

City, State, and Zip

NOTARY PUBLIC  
TALLAHASSEE, FLORIDA

2010 DEC 28 PM 12:27

611 11 00

*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.*

[Signature]  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

~~Manager~~ Mgr

Natie Williams  
3028 Elmwood Rd  
Tallahassee, FL 82317

Gary Middleton  
3028 Elmwood Rd  
Tallahassee, FL 82317

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 11/1/11 (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**

  
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.)

Gary Middleton  
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)