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•
(Requestor's Name)
(Address)
(Address)
(amaza,
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only



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EFFECTIVE DATE 1-3-11

11 JAN 10 PM 3: 04
SECKLIARY OF STATE

B. BOSTICK

JAN 2 6 2011

EXAMINER

COVER LETTER

ro:

TO: Registration S Division of Co		• •	
SUBJECT: 35 Wa	altonian, L.L.C.	ind Linkille Community	
	Name of Lim	ited Liability Company	
	f Organization and fee(s) are	_	
Please return all corresp	ondence concerning this ma	utter to the following:	
Jody A. F	Pearson		
<u>000y 71. 1</u>	Carson	Name of Person	
		Firm/Company	
P.O. Box	8376		SE SE
		Address	JAN DRI IV
Jupiter, FL			
	C	ity/State and Zip Code	O PH 3: 04
	E-mail address: (to be used	for future annual report notification)	22 C
For further information	concerning this matter, plea	se call:	DA EE }t
	,,,		
Jody Pearsonj	of Person	at (561) 743-5720	
name	of Person	Area Code & Daytime Teleph	ione Number
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status		\$160.00 Filing Fee, Certificate of Status &
		(additional copy is enclosed)	Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section	Street/Courier Address Registration Section	

Division of Corporations Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

.>

ARTICLE I - Name: The name of the Limited Liability Company is	::	
35 Waltonian, L.L. C.		
(Must end with the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the p	orincipal office of the Limited Liabilit	y Company is:
Principal Office Address:	Mailing Address:	
122 Lighthouse Drive	P.O. Box 8376	
Jupiter, FL 33469	Jupiter, FL 33468	_
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Regi business entity with an active Florida registration.)		ranother.
The name and the Florida street address of the	registered agent are:	
Cohen, Norris, Scherer, Weinberger & Wolmer		
Name) 	S R B
712 U.S. Highway	/ One, Suite 400	PH 3: 04
Florida street ad	ddress (P.O. Box <u>NOT</u> acceptable)	ta E-
North Palm Beach	_{n.} 33408	

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..

City, State, and Zip

Registered Agent's Signature (REQUIRED)

(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	Jody A. Pearson P.O. Box 8376 Jupiter, FL 33468			
		A BE	11 JAN 10	A POSSET PROPERTY AND A SECOND PROPERTY AND
		ASSEE, FLOR	10 PM 3: 04	
(Use attachment if necessary)		ORIDA	40	

ARTICLE V: Effective date; if other than the date of filing: January 3, 2011 (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.)

Jody A. Pearson

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)



January 11, 2011

JODY A. PEARSON POST OFFICE BOX 8376 JUPITER, FL 33468

SUBJECT: 35 WALTONIAN, L.L.C. Ref. Number: W11000001857

We have received your document for 35 WALTONIAN, L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6028.

Barbara Bostick Regulatory Specialist II

Letter Number: 411A00001016

11 JAN 10 PM 3: 01,
SEURLIARY OF STATE
TALLAHASSEE FISTATE