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## FLORIDA LIMITED LIABILITY CO.

**Cushing Enterprises LLC** 

Certificate of Status	0
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Estimated Charge	\$155.00

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EXAMINER

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name: The name of the Limited Liability Company is: Cushing Enterprises 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: 509 Dante St. 509 Dante St. Venice FL 34285 Venice FL 34285 ARTICLE M - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot scree 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: Robert C Cushing Name 509 Dante St. Florida street address (P.O. Box NOT acceptable) Venice FL 34285 City, State, and Zip Having been named as registered agent and to accept service of process for the above saled 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)

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(CONTINUED)

THIS INSTRUMENT PREPARED BY Erik R. Lieberman Attorney At Law P.O. Box 1767 Venice, Florida 34284-1787 (941) 485-1671 Fla. Bar #393053

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

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

MGR	Robert C Cushing	
	509 Dante St.	
	Venice FL 34285	
MGR	Kathleen L. Cushing	
	509 Dante St.	
	Venice FL 34285	
Use attachment if necessary)		
LE V: Effective date, if other than the	h	(A)TT(A)

REQUIRED SIGNATURE

Signature of a member of 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.)

Robert C Cushing

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)

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