

L11000054409

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

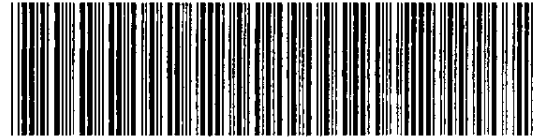
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2011 MAY -4 PM 1:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. SAULSBERRY
EXAMINER

MAY 9 2011

LAW OFFICES OF CHRISTOPHER A. ROCHE

SAND DOLLAR PLAZA
229 NORTH COLLIER BOULEVARD
MARCO ISLAND, FLORIDA 34145

Christopher A. Roche
Attorney at Law

Telephone (239) 389-0700
Facsimile (239) 389-0800

May 2, 2011

Via Federal Express

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301
Phone (850) 245-6051

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TALLAHASSEE, FLORIDA

Re: Filing Articles of
Organization for 1330
Forrest Court, LLC, a
Florida limited liability
company

Gentlemen:

Enclosed please find the Articles of Organization for the
above referenced Limited Liability Company, Acceptance of
Registered Agent, together with a check in the amount of \$125.00
made payable to your order to cover filing of the Articles of
Organization and Acceptance of Registered Agent.

Thank you for your time and efforts in this matter.

Sincerely,



Christopher A. Roche

Enclosures

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 1330 Forrest Court, 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:

Christopher A. Roche, Esquire

Name of Person

Law Office of Christopher A. Roche

Firm/Company

229 N. Collier Boulevard

Address

Marco Island, FL 34145

City/State and Zip Code

CROCHE@MARCOCABLE.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christopher A. Roche, Esquire at (239) 389-0700

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

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TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

1330 Forrest Court, 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:

841 Arcadia Court

Marco Island, FL 34145

Mailing Address:

841 Arcadia Court

Marco Island, FL 34145

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:

Christopher A. Roche, Esquire

Name

229 N. Collier Boulevard

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

Marco Island FL 34145

City, State, and Zip

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TALLAHASSEE, FLORIDA

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)

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:

MGR

Sean M. McKeown

841 Arcadia Court

Marco Island, FL 34145

MGR

Cynthia M. McKeown

841 Arcadia Court

Marco Island, FL 34145

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TALLAHASSEE, FLORIDA

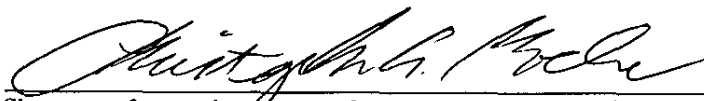
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(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (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.)

Christopher A. Roche, Esquire

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)