

L12000004601

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

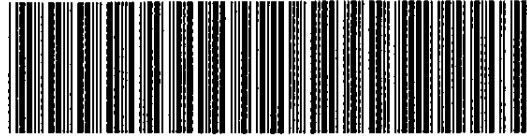
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JAN 10 2012

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FILED
12 JAN -6 PM 4:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**The Law Office of Charles B. King, L.L.C.
56 Myrtle Road
Naples, FL 34108**

SUBJECT:

The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:

Charles King
The Law Office of Charles B. King, L.L.C.
56 Myrtle Road
Naples, FL 34108
cking203@gmail.com

For further information concerning this matter please call: Charles King at 239 919 4182.

Enclosed is the filing fee of \$125.

Thank you in advance,

Charles King

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

THE LAW OFFICE OF CHARLES B KING 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:

56 MYRTLE RD
NAPLES, FL 34108

Mailing Address:

56 MYRTLE RD
NAPLES, FL 34108

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:

BENJAMIN KING
Name

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

NAPLES FL 34108
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)

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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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

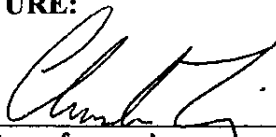
CHARLES KING
56 MYRTLE RD
NAPLES, FL 34108

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: ~~January 13, 2012~~ (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.)

CHARLES KING

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)

165.00