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TALLAHASSEE, FLORIDA

T. CLINE
MAR 19 2012
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FTSU in Paradise, 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:

Barry Bosley

Name of Person

FTSU in Paradise, LLC

Firm/Company

2880 Sally Ann Dr.

Address

Loveland, Co 80537

City/State and Zip Code

boz2880@yahoo.com

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

For further information concerning this matter, please call:

Barry Bosley

Name of Person

at (970) 481-5981

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, FL 32301

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

FTSU in Paradise, 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:

2061 Willow Hammock Circle
#202
Punta Gorda, FL 33983

Mailing Address:

2880 Sally Ann Dr
Loveland, Co. 80537

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:

John Germain

Name

1315 Saxony Circle, Unit 1202

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

Punta Gorda FL 33983

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:

Conrad Schaefer, MGRM

3750 Drake Dr.
Loveland, Co 80538

Kim Schaefer, MGRM

3750 Drake Dr.
Loveland, Co 80538

Hal Pettit, MGRM

711 East 19th St. Rd.
Greeley, Co 80631

Marsha Pettit, MGRM

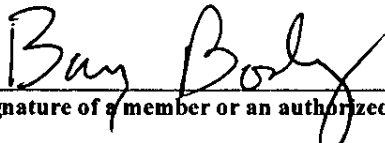
711 East 19th St. Rd.
Greeley, Co. 80631

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: March, 26, 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.)

Barry Bosley

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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TALLAHASSEE, FLORIDA

ATTACHMENT FOR ARTICLE IV

Jim Bert, MGRM

228 Wood Duck Ct.

Windsor, Co 80550

Bev Bert, MGRM

228 Wood Duck Ct.

Windsor, Co 80550

Barry Bosley, MGRM

2880 Sally Ann Dr.

Loveland, Co 80537

Laurie Bosley, MGRM

2880 Sally Ann Dr.

Loveland, Co 80537

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