L12000044887

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

Office Use Only



000226612010

03/30/12--01016--008 **(60.00

FILED
12 MAR 30 PM 1: 08
SECRETARY OF STATE

C. LEWIS

APR -2 2012

EXAMINER

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT. VanTil	Furniture and D	esign, LLC	
		ed Liability Company	
The enclosed Articles of	Organization and fee(s) are	submitted for filing	
	ndence concerning this mat	_	
r lease return an correspo	ndence concerning this mat	ter to the following.	
<u>Mark E. V</u>	anTil	N. CD.	
		Name of Person	
VanTil Fur	niture and Desi	-	
		Firm/Company	
234 E. 8th	Avenue		
		Address	
Windermere			
mark vantil@		y/State and Zip Code	
mark.vanui@	E-mail address: (to be used	for future annual report notification)	
For further information co	oncerning this matter, please	e call:	
Mark E. VanTil		at (321) 231-4343	
Name of	Person	Area Code & Daytime Telep	hone 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 Ci Tallahassee, FL 32301	ircle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

4 132		TA.T	
ART	 , K.	- N:	ame:

The name of the Limited Liability Company is:

VanTil Furniture and Design, 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:		
234 E. 8th Avenue Windermere, FL 34786	234 E. 8th Avenue Windermere, FL 34786		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the manual Mark E. VanTil	registered agent are:		FL
234 E. 8th Avenue Florida street address (P.O. Box NOT acceptable) Windermere FL 34786		PM 1: 08	ΞD
	ate, 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 corprovided for in Chapter 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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

FILED

The name and address of each Manager or Managing Member is as follows: 12 MAR 30 PM 1: 08

"MGR" = Manager "MGRM" = Managing Member		SECALTARY (TALLAHASSEE
MGR	Mark E. VanTil	
	234 E. 8th Avenue	
	Windermere, FL 34786	
MGR	Laura Ann Kessler VanTil	
	234 E. 8th Avenue	
	Windermere, FL 34786	
		
(Use attachment if necessary)		
LE V: Effective date, if other than the	date of filing:	(OPTIONA
fective date is listed, the date must be	e specific and cannot be more th	an five business day
days after the date of filing.)		v
DECHIDED SIGNATUDE.	1 //	
REQUIRED SIGNATURE:		

(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.)

Mark E. VanTil

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)