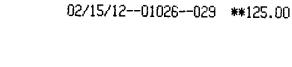
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(Re	equestor's Name)	
· (Ad	ddress)	
(Ad	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	



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G. MCLEOD

APR - 5 2012

EXAMINER

W12-9323

COVER LETTER

TO: 'Registration Division of	n Section Corporations		
SUBJECT: Max	imum Properties,	LLC	
30302011		ted Liability Company	
The enclosed Article	s of Organization and fee(s) are	submitted for filing.	
Please return all corr	espondence concerning this mat	tter to the following:	
Lynn W	/helpley		
		Name of Person	
Abunda	int Home Realty, li		
		Firm/Company	
P.O. Bo	x 110016		
		Address	
Palm Bav	, FL 32911		
		ty/State and Zip Code	
lynnwhelp	oley@yahoo.com		
	E-mail address: (to be used	for future annual report notification)	
For further information	on concerning this matter, pleas	e call:	
Lynn Whelpley	,	at (321) 544.9380	
Nai	ne of Person	Area Code & Daytime Telephone Number	
	for the following amount: \$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee & Certificate of (additional copy is enclosed) Certified Copy (additional copy	f Status &
	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	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Cor	npany is:
Maximum Properties, LL	Extreme Maximum Properties, LL
(Must end with the words "Li	mited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address	s of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
111 Enterprise Avenue	P.O. Box 110016
Suite 3	Palm Bay, FL 32911
Palm Bay, FL 32909	

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:

Name

560 Jupiter Blvd.

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

Palm Bay

FL 32907

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.

egistered Agent's Signature (REQ JIRED)

(CONTINUED)

Page 1 of 2

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing N	Name and Address: Member
MGRM	Lynn Whelpley
	560 Jupiter Blvd.
	Palm Bay, FL 32907
MGR	Ron Whelplay
	560 Jupiter Blvd.
	Palm Bay, FL 32907
MGR	Eric Johnsen
	19630 Bergenfeld Drive
	Land O Lakes, FL 34638
MGR	Raina Ferro-Johnsen
	19630 Bergenfeld Drive
	Land O Lakes, FL 34638
(Use attachment if neces	sai y j
	date must be specific and cannot be more than five business (ing.)
Tective date is listed, the days after the date of fil	
Tective date is listed, the days after the date of fil	date must be specific and cannot be more than five business (ing.)
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fective date is listed, the days after the date of fil REQUIRED SIGNATI Signatu	date must be specific and cannot be more than five business of ing.) TRE: The of a member or an authorized representative of a member.
fective date is listed, the days after the date of fil REQUIRED SIGNATI Signatur	date must be specific and cannot be more than five business (ing.) TRE: The of a member or an authorized representative of a member. With section 608.408(3), Florida Statutes, the execution of this document
fective date is listed, the days after the date of fil REQUIRED SIGNATU Signatu (In accordance we constitutes an af I am aware that	date must be specific and cannot be more than five business (ing.) TRE: The of a member or an authorized representative of a member.

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)