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COVER LETTER

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TO: Registration Section Division of Corporations	
47446 ELLIE 11.C	
SUBJECT: 17416 ELLIE, LLC	
Name of Limite	ed Liability Company
The enclosed Articles of Organization and fee(s) are s	
Please return all correspondence concerning this matter	Name of Person
<u>Thomas M. Dryden, Esq.</u>	<u> </u>
	Name of Person
Thomas M. Dryden, P.L.	2
	Firm/Company
4505 0 1 1 1 1 1 1 1 1 1 1	-3 Green & Gre
1705 Colonial Blvd., Ste. B	-3
	Address
Fort Myorn Et 22007	
Fort Myers, FL 33907	y/State and Zip Code
·	yrsaic and sip code
helen.deveau@gmail.com	or future annual report notification)
·	•
For further information concerning this matter, please	e call:
Thomas M. Dryden, Esq.	at (239) 337-2001
Name of Person	Area Code & Daytime Telephone Number
	,
Enclosed is a check for the following amount:	
 \$125.00 Filing Fee	\$155.00 Filing Fee & \$160.00 Filing Fee,
Certificate of Status	Certified Copy Certificate of Status &
	(additional copy is enclosed) Certified Copy
	(additional copy is enclosed)
Mailing Address	Street/Courier Address
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILIT ARTICLE I - Name: The name of the Limited Liability Company is: **17416 ELLIE. 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: **Mailing Address:** Principal Office Address: 21810 Palmetto Dunes Dr. 21810 Palmetto Dunes Dr. Unit 202 **Unit 202** Estero, FL 33928 Estero, FL 33928 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: Charles Deveau Name 21810 Palmetto Dunes Dr. #202 Florida street address (P.O. Box NOT acceptable) FL FL 33928 City, State, and Zip Estero 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

(CONTINUED)

Registered Agent's Signature (REQUIRED)

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Page 1 of 2

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGRM	Charles Deveau	
	21810 Palmetto Dunes Dr. Unit 202	型 🔐
	Estero, FL 33928	2 NS
MGRM	Helen Deveau	3 3
	21810 Palmetto Dunes Dr. Unit 202	in in
	Estero, FL 33928	
		, ²¹ (/
		ely
		<u> </u>
(Use attachment if necessary)		
LE V: Effective date, if other than fective date is listed, the date mu	n the date of filing:	(OPTIONAL) e business days p
LE V: Effective date, if other than fective date is listed, the date mu		- `
CLE V: Effective date, if other than effective date is listed, the date mu 0 days after the date of filing.) REQUIRED SIGNATURE:	St be specific and cannot be more than five	e būsiness days p
CLE V: Effective date, if other than effective date is listed, the date mu 0 days after the date of filing.) REQUIRED SIGNATURE:		e būsiness days p

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

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)