## L/20000583266

	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone	#)
PICK-UF	P WAIT	MAIL
	(Business Entity Nam	e)
	(Document Number)	_
Certified Copies	Certificates	of Status

Special Instructions to Filing Officer:

A. LUNT

MAY -1 2011

**EXAMINER** 

Office Use Only



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04/26/12--01032--021 \*\*130.00 \*\*\*

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SELRETARY OF STATE TALLAHASSEE, FLORIDA

4PR 26 FH 1:

## **COVER LETTER**

Division of Corpo			
SUBJECT: Rent Fro	om Mark LLC		
SUBJECT:		ed Liability Company	
The enclosed Articles of O	rganization and fee(s) are	submitted for filing.	
Please return all correspond	lence concerning this matt	er to the following:	
Mark Willia	ms		
		Name of Person	
Rent From	Mark LLC		
		Firm/Company	PS 2
14320 Bella	Lane		2812 APR
		Address	R 26
Orlando / FL	32832		500
	Cit	y/State and Zip Code	- C - C
winumall@aol		- C	<u> </u>
		or future annual report notification)	<b>5</b> 4.7
For further information con	cerning this matter, please	e call:	
Mark Williams		at ( 321 ) 231-8307	
Name of P	erson	Area Code & Daytime Teleph	none Number
Enclosed is a check for the	ne following amount:		
\$125.00 Filing Fee  \$\square\$	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 Fallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Cir	rcle

Tallahassee, FL 32301

ADTICLES OF ODC ANIZATION FOD FI	ORIDA LIMITED LIABILITY COMEANY
ARTICLES OF ORGANIZATION FOR FL	OKIDA LIVITED LIABILIT PEOVEANT
ARTICLE I - Name:	五年 カ <b>一</b>
The name of the Limited Liability Company is:	26 ASS
Rent From Mark LLC	
(Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")
,	Sand Arts Mary
ARTICLE II - Address:	
The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
14320 Bella Lane	14320 Bella Lane
Orlando, FL 32832	Orlando, FL 32832
business entity with an active Florida registration.)  The name and the Florida street address of the re  Mark Williams	egistered agent are:
Name	
14320 Bella Lane	
Florida street add	ress (P.O. Box <u>NOT</u> acceptable)
Orlando	<sub>FL</sub> 32832
City, Sta	te, and Zip
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	incomplete the service of process for the above stated limited this certificate, I hereby accept the appointment as in. I further agree to comply with the provisions of all informance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S
vestoreren viseur z zistuari	

(CONTINUED)

<u> Title:</u>	Name and Address:	LA.
"MGR" = Manager		SHUAL TAKE
"MGRM" = Managing Member		တို့
MGR	Mark Williams	
	14320 Bella Lane	[ [ \$45]
	Orlando, FL 32832	
		T
(Use attachment if necessary)  LE V: Effective date, if other than fective date is listed, the date must	the date of filing:the specific and cannot be more than	(OPTION
LE V: Effective date, if other than fective date is listed, the date must days after the date of filing.)	the date of filing:st be specific and cannot be more than	(OPTION five business da
LE V: Effective date, if other than fective date is listed, the date must days after the date of filing.)	the date of filing:st be specific and cannot be more than	(OPTION five business da
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LE V: Effective date, if other than fective date is listed, the date must days after the date of filing.)  REQUIRED SIGNATURE:	the date of filing:st be specific and cannot be more than  M  mber or an authorized representative of a m	five business da
LE V: Effective date, if other than fective date is listed, the date must days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a mean constitutes an affirmation upon a market that any false in	st be specific and cannot be more than	nember.  this document and herein are true.
LE V: Effective date, if other than fective date is listed, the date must days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a mere (In accordance with section constitutes an affirmation used in a ware that any false in constitutes a third degree feature.	mber or an authorized representative of a median formation submitted in a document to the Depelony as provided for in s.817.155, F.S.)	nember.  this document and herein are true.
LE V: Effective date, if other than fective date is listed, the date must days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a mean constitutes an affirmation uplane and family and aware that any false in	mber or an authorized representative of a median formation submitted in a document to the Depelony as provided for in s.817.155, F.S.)	nember.  this document and herein are true.
LE V: Effective date, if other than fective date is listed, the date must days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a mere (In accordance with section constitutes an affirmation used in a management of the section constitutes and affirmation used in the section constitutes at the section cons	mber or an authorized representative of a moder the penalties of perjury that the facts state afformation submitted in a document to the Depelony as provided for in s.817.155, F.S.)	nember.  this document and herein are true.