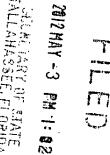
(Req	questor's Name)
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(City,	/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
(Bus	iness Entity Name)
(Doc	cument Number)
, Certified Copies	Certificates of Status
Special Instructions to F	iling Officer:
	A. LUNT
	MAY -8 2011
	EXAMINE
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Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: REM 237 WEST ST	ETSON STREET, 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:			
RICHARD L. KITT			
	Name of Person		
-	Firm/Company		
	- Innicompany	, <u>, , , , , , , , , , , , , , , , , , </u>	
500 Palmetto Avenue		2817	
	Address		
Sanford, FL 32771	ርም የ ቀር የጉ	\mathbb{R}^{-1} ω	
	City/State and Zip Code	9 3	
mej11@yahoo.com		<u> </u>	
E-mail address: (to be us	sed for future annual report notification)	5m 69	
For further information concerning this matter, pl	lease call:	y	
RICHARD L. KITT	at (407) 620-6344		
Name of Person	Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount	t:		
\$125.00 Filing Fee \$\times\$ Certificate of Status		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 Company is:

REM 237 WEST STETSON STREET, 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:
500 Palmetto Avenue	500 Palmetto Avenue
Sanford, FL 32771	Sanford, FL 32771

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:

	City, State, and Zip	7. W	T T T
Sanford	_{FL} 32771		i i
	Florida street address (P.O. Box NOT acceptable)	新美 法	-
500 Pa	Imetto Avenue		7
	Name		i
RICHAR	D L. KITT	Fig. N	•

Having been named as registered agent and to accept service of process for the above stilled 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)

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

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

MGR	RICHARD L. KITT 500 Palmetto Avenue
	500 Palmetto Avenue
	Sanford, FL 32771
	m Ties
	71 71
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(Use attachment if necessary)	
LE V : Effective date, if other than	the date of filing: (OPTIONAL)
days after the date of filing.)	st be specific and cannot be more than five business day

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.)

RICHARD L. KITT

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)