# L1200097730

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

JUL 3 0 2012

EXAMINER



500237832805

07/27/12--01021--007 \*\*125.00

EFFECTIVE DATE 5 1 2017

DEVERSAL OF CORPORATIONS
12 SUC 27 Ma 1: 49

		COVE	M LEITER		FFFFCTIVE DAJE_8
TO:	Registration Section Division of Corporations			. <del>"</del>	CIVE DAJE O
SUBJE	ect: <u>CK</u>	Remod Name of Limi	e   Reparted Liability Comp	UR, LL any	C. 12 27 27 27 27 27 27 27 27 27 27 27 27 27
The end	closed Articles of Organization	and fee(s) are	submitted for filing	g.	2
Please	return all correspondence conc	erning this ma	tter to the following	<b>3</b> :	
	Christopher G. K	oubek			
•			Name of Person		
			Firm/Company		
_	2525 McGraw Ave	enue			
			Address		
Ņ	Melbourne, FL 329		*		
	-1	Ci	ty/State and Zip Code	;	
-	ckoubek2@cfl.rr.com E-mail addi	ress: (to be used	for future annual repo	ort notification)	
For furt	her information concerning thi		•	,	
Chris	topher G. Koubek		at ( 321	508-2712	2
	Name of Person	· . · ·	Area Code	& Daytime To	lephone Number
Enclose	ed is a check for the followi	ng amount:			
125.00	Filing Fee \$130.00 Fi Certificat	ling Fee & e of Status	\$155.00 Filin Certified Cop (additional copy	py	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Ad Registration Division of P.O. Box 6:	Section Corporations	Registrati	ourier Address on Section of Corporation uilding	_

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327 Tallahassee, FL 32314

EFFECTIVE LIATE 8 1 2012

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY O **ARTICLE I - Name:** The name of the Limited Liability Company is: ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: **Principal Office Address:** Mailing Address: 2525 McGraw Avenue 2525 McGraw Avenue Melbourne, FL 32934 Melbourne, FL 32934 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: Christopher G. Koubek 2525 McGraw Avenue Florida street address (P.O. Box NOT acceptable) Melbourne

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 (REQUIRED)

(CONTINUED)

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

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

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGR	Christopher G. Koubek
	2525 McGraw Avenue
	Melbourne, FL 32934
MGRM	Carmen Koubek
	2525 McGraw Avenue
	Melbourne, FL 32934
(Use attachment if necessary)	
	e date of filing: $8 - 1 - 12$ . (OPTIO be specific and cannot be more than five business of

#### **REQUIRED SIGNATURE:**

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.)

Christopher G. Koubek

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)