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C. LEWIS

AUG -3 2012

EXAMINER

## Kenneth R. Roney, J.D.

4521 W. 14<sup>th</sup> Street Greeley, Colorado 80634 Telephone: (970) 420-8895 • Email: KennethRoney@aol.com,

July 28, 2012

Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

In Re: Destin COOP, LLC

## Gentlemen:

Please find enclosed the Articles of Organization and fees submitted for filing. We request a certified copy of the Articles and have included a stamped self-addressed envelope for your convenience in returning a certified copy to us.

Your assistance in this matter is appreciated.

Kenneth R. Roney

**Enclosures** 

## **COVER LETTER**

TO:	Registration Division of C	section Corporations		
SUBJE	CT. DES	TIN COOP, LLC.		
3000	<u> </u>		ed Liability Company	<del></del>
The en	closed Articles	of Organization and fee(s) are	submitted for filing.	
Please	return all corre	spondence concerning this matt	ter to the following:	
	Kenneth	n R. Roney, Esq.		
			Name of Person	
			•	
			Firm/Company	
	4521 W.	. 14th Street		
			Address	
	Greeley,	CO 80634		
			y/State and Zip Code	
٠.	jerryp12@		for future annual report notification)	
F 4			•	
For tur	ther informatio	on concerning this matter, please	e call:	
Kenr	neth R. Ro	ney, Esq.	at ( 970 ) 420-8895	
	Nam	ne of Person	Area Code & Daytime Telephone Number	er
Enclos	sed is a check	for the following amount:		
\$125.00	Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy Certificat (additional copy is enclosed) Certified	Filing Fee, the of Status & Copy copy is enclosed)
		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:

## DESTIN COOP, 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:** 

Jerry D. Porter

5 Calhoun Avenue, Unit #308

Destin, FL 32541

Jerry D. Porter 8937 Haas Drive

Keller, TX 76244

## 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:

Tim Boulet

Name

## 212 Rose Marie Court

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

Ft. Walton Beach

FL 32548-6620

City, State, and Zip

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SECRETARY OF STATE
SECRETARY OF STATE

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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Manager	Name and Address:  Name and Address:
"MGRM" = Managing Member	
MGRM	Jerry and Toni Porter
	8937 Haas Drive
	Keller, TX 76244
MGRM	Johnny and Delores Jean "Patty" War
	15530 S. Acuff Lane
	Olathe, KS 66062
MGRM	Matthew and Keely Mullins
	4.737 Hunters Crossing Drive
	Old Hickory, TN 37138
MGRM	Robert and Carol Broadbooks
	24502 W. 70th Street
(Use attachment if necessary)	24502 W. 70th Street Shawnee, KS 66226
ffective date is listed, the date mu	
LE V: Effective date, if other than ffective date is listed, the date must days after the date of filing.)  REQUIRED SIGNATURE:	Shawnee, KS 66226  In the date of filing: (OPTIONAL
LE V: Effective date, if other than ffective date is listed, the date mut days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a median constitutes an affirmation I am aware that any false in the constitutes are signature.	Shawnee, KS 66226  In the date of filing: (OPTIONAL list be specific and cannot be more than five business days  A A A A A A A A A A A A A A A A A A A

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)