

L12000113887

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

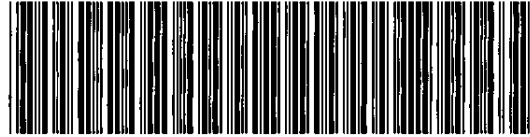
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EFFECTIVE DATE 9/1/2012

FILED
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DIVISION OF CORPORATIONS
12 SEP -4 PM 3:51

COVER LETTER

EFFECTIVE DATE 9/1/2012

TO: Registration Section
Division of Corporations

SUBJECT: 533 Orange L.L.C.
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:

533 Orange LLC Mark or Sharon Strickland
Name of Person

533 Orange L.L.C.
Firm/Company

164 Roselle Court
Address

Port Charlotte, FL 33952
City/State and Zip Code

sharon@performancebldrs.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sharon Strickland at 678-776-3668 - cell
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$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
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 SEP -4 PM 8:51

EFFECTIVE DATE 9/1/2012

FILED BY STATE
SECRETARY OF CORPORATION
DIVISION OF CORPORATIONS
12 SEP-4 PM 3:51

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

533 Orange 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:

164 Roselle Court

Mailing Address:

Port Charlotte, FL 33952

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:

~~533 Orange LLC~~ Mark or Sharon Strickland
Name

164 Roselle Court
Florida street address (P.O. Box **NOT** acceptable)

Port Charlotte, FL 33952
City, State, and Zip

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.

Sharon Strickland
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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Sharon Strickland
164 Roselle Court
Port Charlotte, FL 33952

MGRM

Mark Strickland
164 Roselle Court
Port Charlotte, FL 33952

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 9-1-2012 (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Sharon Strickland

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.)

Sharon Strickland

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)