# L12000120358

(Re	questor's Name)	
(Add	dress)	· .
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(Cit	y/State/Zip/Phone #	<del>(</del> )
PICK-UP	<b>■</b> WAIT 🚶	MAIL
(Bu	siness Entity Name	)
(Do	cument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to I	Filing Officer:	

Office Use Only



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9/17/12

12 SEP 19 AN II: 38

TO: Registratio Division of	n Section Corporations	;	··
<sub>SUBJECT:</sub> Spe	nRuss Investments	s, LLC	
SUBJECT:	<del>, ,</del>	ed Liability Company	
The analoged Auticle	a of Organization and foo(s) and	and an interest of the contract of the contrac	
	s of Organization and fee(s) are	_	
Please return all corr	espondence concerning this matt	er to the following:	
<u>Meredit</u>	th Wilkinson		
		Name of Person	
Marina	Management Corp	oration	
<u> </u>		Firm/Company	·
1901 C	ypress Street		
	7-7-	Address	
Pensaco	la, FL 32502		
		y/State and Zip Code	
meredith	@marinamgmt.com		
		or future annual report notification)	
For further informati	on concerning this matter, please	e call:	
Meredith Wilki	nson	at (850 ) 432-9620	
Na	me of Person	Area Code & Daytime Telep	hone Number
Enclosed is a check	k for the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee &	T\$155 00 Eiling Eoo & IZ	18160 00 Eiling Egg
\$125.00 Tilling Fee	Certificate of Status	Certified Copy	\$160.00 Filing Fee, Certificate of Status &
		(additional copy is enclosed)	Certified Copy (additional copy is enclosed)
			,
	Mailing Address Registration Section	Street/Courier Address Registration Section	
	Division of Corporations	Division of Corporations	
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center C	ircle
	-	Tallahassee, FL 32301	

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	RT	CI	E.	[ • `	Na	m	e:

The name of the Limited Liability Company is:

# SpenRuss Investments, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

#### **ARTICLE II - Address:**

Principal Office Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Mailing Addrage

Timeipai Office Address.	Maning Addi Css.
Meredith Wilkinson / Marina Mgmt. Corp.	Meredith Wilkinson / Marina Mgmt. Corp.
1901 Cypress Street	1901 Cypress Street
Pensacola, FL 32502	Pensacola, FL 32502

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:

Leo Cyr

Name

1901 Cypress Street

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

Pensacola

FL 32502

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.

Registered Agent's Signature (REOTRED

(CONTINUED)

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

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

<u>Title:</u>	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
<del>Q</del> <del>Q</del>	
MGR	Brian K. Spencer
	200 E. Government St. Suite 240-D
	Pensacola, FL 32502
MGRM	Crystal C. Spencer
•	200 E. Government St. Suite 140
,	Pensacola, FL 32502
MGRM	Ray Russenberger
	1901 Cypress Street
	Pensacola, FL 32502
MGRM	Valerie Russenberger
	1901 Cypress Street
	Pensacola, FL 32502
(Use attachment if necessary)	
(Ose attachment if necessary)	
ARTICLE V: Effective date, if other tha	an the date of filing: 09/17/2012 (OPTIONAL)
(If an effective date is listed, the date m	ust be specific and cannot be more than five business tlays prior
to or 90 days after the date of filing.)	S. S.
REQUIRED SIGNATURE:	SSE SSE
REQUIRED SIGNATURE:	
3	MAN SEE SEE SEE SEE SEE SEE SEE SEE SEE SE
Signature of a n	nember or an authorized representative of a member.
4	400 top(a) = 1 to a

(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.)

# Brian K. Spencer

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)