L12000153279

(Requestor's Name)	
(Address)	
·	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MA	AIL
(Outlines Falls Manna)	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
	221
Special Instructions to Filing Officer:	017
0 K000	
le la	
·	- 1

Office Use Only



000242247500

Effective Date 1-1-2013

12/05/12--01008--018 **130.00

2012 DEC -5 AH 19: 20 Seçretary de state

J. SAULSBERRY EXAMINER

DEC 7 2012

COVER LETTER

TO: Registration Section			
Division of Corporations			
SUBJECT: DOCK	SOCKS Name of Limit	L.L.C	
	Name of Limit	ed Liability Company	
The enclosed Articles of Organization	and fee(s) are	submitted for filing.	
Please return all correspondence conce	erning this matt	er to the following:	
RICHARD	M. PRE	ESCHER	
		Name of Person	
D.o.	ck Sock	5 L. L. C.	
700 5.	W. 7	4NG(ENOOD TRA Address F/ 34997 y/State and Zip Code	7iL
		Address	TAZ:S
STUAL	et 1	F1 34997	ZATZ DEC SECRE
	City	y/State and Zip Code	ASSE
		att. net or future annual report notification)	m2
For further information concerning this			AM 19: 20 ESTATE FLORIDA
RICHARD PRESCI	HER	at (772) 209-	1665
Name of Person		Area Code & Daytime Telepi	hone Number
Enclosed is a check for the followi	ng amount:		
5125.00 Filing Fee S130.00 F Certificat	Filing Fee & e 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 Ad Registration Division of P.O. Box 63	Section Corporations	Street/Courier Address Registration Section Division of Corporations Clifton Building	

Tallahassee, FL 32314

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:
DOCK SOCKS L.L.C.
(Must end with the words "Limited Liability Company, "L.L.C.," or "LI.C.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
700 SW. Tanglewood Tr. 700 SW. Tanglewood Tr. Stuart, FL 34997 Stuart, FL 34997
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:
The name and the Florida street address of the registered agent are: RICHARD M. PRESCHER Name Name
Name SSE JA
Name Name Name Too Sw. Tangewood Tr. Florida street address (P.O. Box NOT acceptable) Stuart FL 34997
Stuart FL 34997 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.

(CONTINUED)

Page 1 of 2

Registered Agent's Signature (REQUIRED)

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

Sp

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

GR" = Manager GRM" = Managing Member M GR	RICHARO M. PRESCHER 700 JW. Tanglewood Tr. Stuart, FL 34997
M GR	RICHARO M. PRESCHER. 700 JW. Tanglewood Tr. Stuart, FL 34997
	700 JW. Tanglewood Tr. Stuart, FL 34997
	Stuart, FL 34441
e attachment if necessary)	
V. Effective date if other than th	ne date of filing: Jan. 1, 2013. (OPTIONAL
	st be specific and cannot be more than five business
90 days after the date of filing.)	
	Aire A
<u>QUIRED</u> SIGNATURE:	EGR LLX
Richard	M. Prescher SSE
(In accordance with section 60 constitutes an affirmation unde 1 am aware that any false information to the constitution of th	8.408(3), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are mation submitted in a document to the Department of States by as provided for in s.817.155, F.S.)
	M. PRESCHER

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)