Pission of Corporations

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Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name :

: WILLIAMS, PARKER, HARRISON, DIETZ & GETZEN

Account Number: 072720000266

: (941)366-4800

Phone Fax Number

: (941)552-7141

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: tftomlinson@gmail.com

MECTO PHIZED

CRETARY OF STATE

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LAHASSEE. FLORIDA

## FLORIDA LIMITED LIABILITY CO. DECATUR AVENUE LLC

Certificate of Status	1
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Page Count	02
Estimated Charge	\$160.00

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**EXAMINER** 

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SECRETARY OF STATE DIVISION OF CORPORATIONS

	2012 DEC 19 AM 7: 56	
ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY		
ARTICLE I - Name: The name of the Limited Liability Com	pany is:	
Decatur Avenue LLC		
(Must end with the words "Lin	nited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
· · · · · · · · · · · · · · · · · · ·	of the principal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
Thomas F. Tomlinson, Manager	Thomas F. Tomlinson, Manager	
8825 Enclave Court	8825 Enclave Court	
Sarasoia, FL 34238	Sarasota, FL 34235	
business entity with an active Florida registration.)  The name and the Florida street address	·	
Cross Street Corpora	Name	
. 200 South Orange Av	ronua	
	street address (P.O. Box NOT acceptable)	
	Sarasota, FL 34236	
	City, State, and Zip	
liability company at the place design registered agent and agree to act in the all statutes relating to the proper and	and to accept service of process for the above stated limited ated in this certificate, I hereby accept the appointment as is capacity. I further agree to comply with the provisions of complete performance of my duties, and I am familiar with on as registered agent as provided for in Chapter 608, F.S	
Pontago R.	Burth) mytter	

Registered Agent's Signature (REQUIRED) Zachany B. Buffington as VP of Cross Struct

(CONTINUED)

Corporate Services, (CONTINUED) LLC

Page 1 of 2

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2012 DEC 19 AM 7: 56

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

Manager

Thomas F. Tordinson

8825 Enclave Court

Managar

Thomas F. Tominson

8825 Enclave Count

Sarasota, FL 34238

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_\_\_. (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:**

Signature of a member or an authorized representative of a member.

(In accordance with section 508.408(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.)

Thomas F. Tominson, Trustee of the Thomas F. Tominson Revocable Trust

Typed or printed name of signee

Filing Pees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

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

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