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PICK-UP	☐ WAIT	MAIL.
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Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		





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SECRETARY OF STATE

J. BRYAN

JAN - 7

**EXAMINER** 

#### TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: R D Griffin Family Rentals, LLC

(Proposed Corporate Name - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\_\_\_ \$70.00 Filing Fcc \$78.75

Filing Fee

& Certificate of Status

LLC: X \$155
Filing Fee
&Certified Copy

\_\_\_\$78.75 \_\_\_\$87.50
Filling Fee
& Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM:	Gary S. Wright, P.A.	
	Name (Printed or typed)	
	465 Summerhaven Drive #C	
	Address	
	DeBary, FL 32713	
	City, State & Zip	
	(386)753-0280·	
	Daytime Telephone Number	

NOTE: Please provide the original and one copy of the articles.

# **ARTICLES OF ORGANIZATION**

<u>OF</u>

# R D GRIFFIN FAMILY RENTALS, LLC



<u>NAME</u>



The name of the Limited Liability Company is R D GRIFFIN FAMILY RENTALS, LLC.

## ARTICLE II

#### <u>ADDRESS</u>

The mailing address of the Limited Liability Company's principal office is <u>150 Poinciana</u>

<u>Lane, Deltona, FL</u> 32738.

The street address of the Limited Liability Company's principal office is 150 Poinciana Lane, Deltona, FL 32738.

#### **ARTICLE III**

#### **DURATION**

The period of duration for the Limited Liability Company shall be perpetual.

## ARTICLE IV

#### **MANAGEMENT**

The managing members, Dorothy G. McBroom and Russell J. Griffin, who are designated by the member(s) as the managers of this limited liability company, and shall carry

out and further the decisions and action of the member(s) made under the Operating Agreement and shall be authorized to execute any and all reports, forms, instruments, document, papers, writings, agreements, and contracts, including but not limited to deeds, bills of sale, assignments, leases, promissory notes, mortgages, and security agreements and any other type or form of document by which property or property rights of the Company are transferred or encumbered, or by which debts and obligations of the Company are created, incurred, or evidenced, that are necessary, appropriate, or beneficial to carry out or further those decisions or actions.

In accordance with F.S. 608.408(3), the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Authorized/Representative

RY OF STATE SSEE, FLORIDA

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

UNDER THE PROVISIONS OF F.S. 608.415, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

The name of the limited liability company is R D GRIFFIN FAMILY RENTALS, LLC.

The name and the Florida street address of the registered agent is:

Dorothy G. McBroom 150 Poinciana Lane Deltona, FL 32738 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.

# R D GRIFFIN FAMILY RENTALS, LLC

Dorothy G. McBroom

Registered Agent

STATE OF FLORIDA COUNTY OF VOLUSIA

Notary Public

Notary printed name Commission No.

My Commission Expires:

NOTARY PUBLIC-STATE OF FLORIDA

Lana R. Harrison

Commission # EE098055

Expires: JUNE 05, 2015

BORDED THRU ATLANTIC BONDING CO, INC.