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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificate	s of Status
Special Instructions to I	Filing Officer:	

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SECRETARY OF STATE
TALLAHASSEF FI ORION

D. BRUCE
JAN 0 8
EXAMINER

## **COVER LETTER**

TO: Registration Section
Division of Corporations

7261 PALMETTO BAY LLC

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:

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PAUL V	VEST				
\$100 <u>0000000000000000000000000000000000</u>		Name of Person			
		····			
		Firm/Company			
9186 R	OSEWATER	LANE			
		Address		<del></del>	<del></del>
JACKS	ONVILLE, FL	. 32256			
· · · · · · · · · · · · · · · · · · ·	Cit	y/State and Zip Co	de		
west9897	@bellsouth.net			So	20
	E-mail address: (to be used to	for future annual re	port notification)		حت ۔
For further information	concerning this matter, please	call:		<b>5</b>	
	-		070 5	AR AR	17
PAUL WE	SI	<sub>at</sub> 786	<sub>,</sub> 376-5	9/4 %	-
Name	of Person	Area Co	de & Daytime Tele	phone Number CORD	PHIS: HI
Enclosed is a check f	or the following amount:			DA	ţ-
■\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Fil Certified C (additional co	-	\$160.00 Filing Certificate of St Certified Copy (additional copy is	tatus &
	Mailing Address Registration Section Division of Corporations	Registr	Courier Address ation Section on of Corporation		

Registration Section
Division of Corporation
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

7261 PALMETTO	BAY LLC.		
	(Must end with the words "Limited	d Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II -	Addroce:		
		the principal office of the Limited Lia	ability Company is:
<b>5</b>			
Principal Offi	<u>ce Address:</u>	<b>Mailing Address:</b>	
5531 NW 112 AVE	NUE SUITE 118	5531 NW 112 AVENUE, SUITE 118	·
MIAMI, FL. 33178	1102,00112 110	MIAMI, FL. 33178	<u> </u>
····			<del></del>
	ity Company cannot serve as its own han active Florida registration.)	stered Office, & Registered Agent's n Registered Agent. You must designate an indivi	
business entity wit	h an active Florida registration.) the Florida street address of	n Registered Agent. You must designate an indivi	dual or another
business entity wit	h an active Florida registration.) the Florida street address of PAUL WEST	n Registered Agent. You must designate an indivi	dual or another
business entity wit	h an active Florida registration.) the Florida street address of PAUL WEST	n Registered Agent. You must designate an indivi	dual or another
business entity wit	h an active Florida registration.) the Florida street address of PAUL WEST  9186 ROSEWATER LANE	n Registered Agent. You must designate an indivi	dual or another
business entity wit	h an active Florida registration.) the Florida street address of PAUL WEST  9186 ROSEWATER LANE Florida str	f the registered agent are:  Name  reet address (P.O. Box <u>NOT</u> acceptable)	idual or another  2019 JAN - 7  SECRE IARY IALLAHASSE
business entity wit	h an active Florida registration.) the Florida street address of PAUL WEST  9186 ROSEWATER LANE Florida str  JACKSONVILLE	f the registered agent are:  Name  reet address (P.O. Box <u>NOT</u> acceptable)  FL 32256	idual or another  2019 JAN - 7 PH  SECRETARY OF  TALLAHASSEE F
business entity wit	h an active Florida registration.) the Florida street address of PAUL WEST  9186 ROSEWATER LANE Florida str  JACKSONVILLE	f the registered agent are:  Name  reet address (P.O. Box NOT acceptable)  FL 32256  City, State, and Zip	dual or another  2018 JAN - 7 PH 12: 1  SECRE IARY OF STATEMENT OF STA
business entity wit  The name and the same a	h an active Florida registration.) the Florida street address of PAUL WEST  9186 ROSEWATER LANE Florida str  JACKSONVILLE  commed as registered agent a	f the registered agent are:  Name  reet address (P.O. Box NOT acceptable)  FL 32256  City, State, and Zip  and to accept service of process for the	dual or another  2019 JAN - 7 PH 12: 47 Interest of STATE AND STATE Above stated limited above stated limited.
business entity wit The name and the name an	h an active Florida registration.) the Florida street address of PAUL WEST  9186 ROSEWATER LANE Florida str  JACKSONVILLE  camed as registered agent an an apany at the place designate.	f the registered agent are:  Name  Registered agent are:	SECRE JAN - 7 PH 12: 4 above stated limited the appointment as
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Having been r liability cor registered ag all statutes r	paul WEST  9186 ROSEWATER LANE Florida str  9186 ROSEWATER LANE Florida str  JACKSONVILLE  anamed as registered agent an annual part the place designate the proper and containing to the proper and containing the proper	f the registered agent are:  Name  Registered agent are:	dual or another  2013 JAN + 7 PH 12: 4 limited he appointment as ith the provisions of I am familiar with

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Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

"MGR" = Managing Member  MGR  PAUL WEST  9186 ROSEWATER LANE  JACKSONVILLE, FL. 32256   (Use attachment if necessary)  ICLE V: Effective date, if other than the date of filing:
MGR  PAUL WEST  9186 ROSEWATER LANE  JACKSONVILLE, FL. 32256  (Use attachment if necessary)  CLE V: Effective date, if other than the date of filing:  (OPTION effective date is listed, the date must be specific and cannot be more than five busing the date of the second cannot be more than five busing the date of the second cannot be more than five busing the date of the second cannot be more than five busing the date of the second cannot be more than five busing the second cannot be more than
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effective date is listed, the date must be specific and cannot be more than five busin
effective date is listed, the date must be specific and cannot be more than five busin
to or 90 days after the date of filing.)
DECLUDED CICNATUDE.
REQUIRED SIGNATURE:
V MAA A I MAISAIL
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
(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.
(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
(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.)
(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.)

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

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