# L13000015726

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

(JAN 3 0 2013 B. KOHR

200243433842

01/14/13--01029--024 \*\*125.00

13 JAN 28 PH 1: 46
SECRETARY OF STATE
TALLAHASSEE, FLORIB.



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

January 16, 2013

RICHARD STANLEY 521 11TH AVENUE SOUTH JACKSONVILLE BEACH, FL 32250

SUBJECT: STANLEY RESOURCE MANAGEMENT

Ref. Number: W13000003345



We have received your document for STANLEY RESOURCE MANAGEMENT and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your company must end in a suffix. Use LLC or L.L.C.

ALSO, please list the name and address of the company's Registered Agent in Article III, and have the agent sign the acceptance statement.

Any individual with a Florida street address may serve as a Registered Agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Buck Kohr Regulatory Specialist II

Letter Number: 813A00001313

#### COVER LETTER

TO: Registration Section
Division of Corporations

Stanley Resource Management, 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:

# Richard Stanley

Name of Person

# Stanley Resource Management, LLC

Firm/Company

## 521 11th Avenue S

Address

## Jacksonville Beach, FL 32250

City/State and Zip Code

### richstanley0525@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Enclosed is a check for the following amount:

■\$125.00 Filing Fee ■\$130.00 Filing Fee &

Certificate of Status C

□\$155,00 Filing Fee & Certified Copy

(additional copy is enclosed)

□ \$160.00 Filing Fee, Certificate of Status & Certified Copy

(additional copy is enclosed)

To Mark The Control of the Control o

#### **Mailing Address**

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

#### Street/Courier Address

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

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	· soffice
The name of the Limited Liability Company	
Stanley Resource Management, LLC	
(Must end with the words "Limited L	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	e principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
521 11th Avenue S	521 11th Avenue S
Jacksonville Beach, FL 32250	Jacksonville Beach, FL 32250
	<u></u>
business entity with an active Florida registration.)  The name and the Florida street address of the	egistered Agent. You must designate an individual or another ne registered agent are:
Richard Stanley	me
ina	ine
521 11th Avenue S	
	address (P.O. Box NOT acceptable)
Jacksonville Beach	<sub>FL</sub> 32250
City	, State, and Zip
liability company at the place designated registered agent and agree to act in this cap all statutes relating to the proper and comp	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as pacity. I further agree to comply with the provisions of plete performance of my duties, and I am familiar with a registered agent as provided for in Chapter 608, F.S

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGR	Richard Stanley
	521 11th Avenue S
	Jacksonville Beach, FL 32250
	-
(Use attachment if necessary)	
CLE V: Effective date, if other than the	ne date of filing: (OPTIONAL)
	st be specific and cannot be more than five business day
REQUIRED SIGNATURE:	
j	
Signature of a memb	per or an authorized representative of a member.
(In page-dames with acction 60	08.408(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. 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.)

Richard Stanley

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)