

L13000071440

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

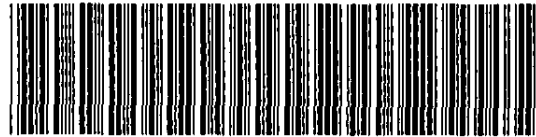
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

? effective
date
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02/28/13--01030--023 **130.00

FILED
2013 FEB 28 AM 8:25
J. SAULSBERRY
EXAMINER

J. SAULSBERRY
EXAMINER

MAY 15 2013

(850) 245-6051.

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: **Functional Feet, 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:

Dana Walker

Name of Person

Functional Feet, LLC

Firm/Company

DW
~~4137 Bay Beach Lane, Condo 521~~ **39 Fairview Blvd**

Address

Fort Myers Beach, FL 33931

City/State and Zip Code

akling@pvoac.com

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

For further information concerning this matter, please call:

Dana Walker

Name of Person

at **240 888-1956**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☒ \$130.00 Filing Fee & Certificate 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 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

FILED
2013 FEB 28 AM 8:25
CLERK OF COURT
JUDICIAL CIRCUIT IN AND FOR
THE NINTH JUDICIAL CIRCUIT
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Functional Feet, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

~~4137 Bay Beach Lane~~ 39 Fairview Blvd
~~Condo 521~~
Fort Myers Beach, FL 33931

Mailing Address:

~~4137 Bay Beach Lane~~ 39 Fairview Blvd
~~Condo 521~~
Fort Myers Beach, FL 33931

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:

Dana Walker

Name

~~4137 Bay Beach Lane, Condo 521~~ 39 Fairview Blvd
Florida street address (P.O. Box NOT acceptable)
Fort Myers Beach, FL 33931
City, State, and Zip

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CLERK OF DISTRICT COURT
FALL ANDERSON COUNTY, FLORIDA

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..


Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

Name and Address:

MGRM

Dana Walker

4137 Bay Beach Lane, Condo 521

Fort Myers Beach, FL 33931

MGRM

Anthony D. Kling

19829 New Hampshire Avenue

Brinklow, MD 20862

2013 FEB 28 AM 8:25

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(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: February 6, 2013. (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 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.817.135, F.S.)

Dana Walker

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)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 1, 2013

DANA WALKER
FUNCTIONAL FEET LLC
4137 BAY BEACH LANE, CONDO 521
FORT MYERS BEACH, FL 33931

SUBJECT: FUNCTIONAL FEET, LLC
Ref. Number: W13000012404

Did not change effective date
9/8
5/2/13

We have received your document for FUNCTIONAL FEET, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on February 28, 2013. Please amend your document accordingly.

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.

Jeraline Saulsberry
Regulatory Specialist II

Letter Number: 813A00004947

FILED

2013 FEB 28 AM 8:25

OFFICE OF THE CLERK
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32314