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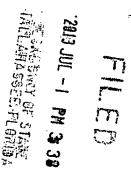
(Requestor's Name)
(Address)
(1887-885)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Dodamon Valla)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to Fining Officer.
'JUL' - 2 2013
A. LUNT
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(850) 245-6051.

COVER LETTER

TO:

Registration Section Division of Corporations

Lot 0, North Dale Mabry Hwy 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:

For further information concerning this matter, please call:

Mark Berset

_727

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

515-5548

Name of Person

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Com	pany is:
Lot 0, North Dale Mabry Hwy LLC (Must end with the words "Lim	nited Liability Company, "L.L.C.," or "LLC.")
(Musi end with the words - Ent.	med Entomy Company, E.E.C., or EEC.
ARTICLE II - Address: The mailing address and street address a	of the principal office of the Limited Liability Company is:
The manning address and street address t	of the principal office of the Elimited Elaonity Company is.
Principal Office Address:	Mailing Address:
One Beach Drive SE	P.O. Box 1438
Suite 230	
St. Petersburg, FL 33701	St. Petersburg, FL 33731-1438
The name and the Florida street address Mark S. Berset One Beach Drive SE, Su	Name Si & C
St. Petersburg	•
Ot. 1 eteraburg	FL 33701 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 accept the obligations of my ositi	and to accept service of process for the above stated limited that at a stated 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 ion as registered agent as provided for in Chapter 608, F.S

Page 1 of 2

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

MGRM	George Apostolou	TOTAL TE
	275 1st Street W	1 Con
	Tierra Verde, FL 33715	
MGR	Mark Berset	W.
***************************************	1050 Friendly Way S	
	St Petersburg, FL 33705	
(Head and a share and if a second		
(Use attachment if necessary)		

-2

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.817.155, F.S.)

Mark S. Berset

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)