

L13000099229

(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:

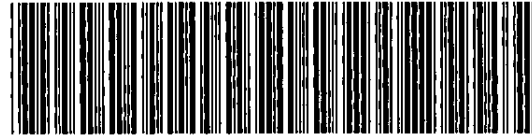
L. SELLERS

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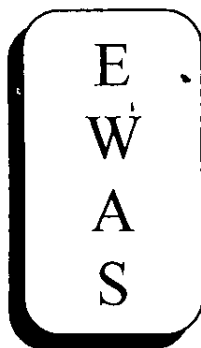
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



East
Washington
Accounting
Services, Inc.

P O Box 1006

Pierson, FL 32180

(386) 749-9010 (904) 501-0929 Fax (386) 749-4471

**FILING INSTRUCTIONS
ARTICLES OF ORGANIZATION**

TO: LuXe Camping, LLC Date: April 24, 2013

SIGNATURE:

Your signature is required in two places, one on page 1 and the other on page 2, both copies. Be sure to include the date on page 2 of both copies.

CHECK:

Make your check payable to FLORIDA SECRETARY OF STATE in the amount of \$125.00.

MAIL:

Mail check, Transmittal Letter, and **two signed** copies of the Articles of Organization to:

Department of State
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

(A pre-addressed envelope is enclosed for your convenience.)

COPY:

A copy of the Articles of Organization and Transmittal Letter are enclosed for your file.

**ARTICLES OF ORGANIZATION
OF
LUXE CAMPING, LLC**

ARTICLE I: NAME

The name of the Limited Liability Company is:

LuXe Camping, LLC

ARTICLE II: ADDRESS

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

MAILING ADDRESS:

76 Oneida Street
St Augustine, FL 32084

STREET ADDRESS:

76 Oneida Street
St Augustine, FL 32084

**ARTICLE III: REGISTERED AGENT, REGISTERED OFFICE &
REGISTERED AGENT'S SIGNATURE:**

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

Paul G Morris
76 Oneida Street
St Augustine, FL 32084

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, Florida Statutes.



PAUL G MORRIS

ARTICLE IV: MANAGER OR MANAGING MEMBER


The names and addresses of each Managing Member and Member are as follows:

MGRM	Paul G Morris 76 Oneida Street St Augustine, FL 32084	50%
MGRM	Rebecca Morris 76 Oneida Street St Augustine, FL 32084	50%

ARTICLE V: EFFECTIVE DATE

The effective date of this limited liability company shall be immediately.

REQUIRED SIGNATURE:

✓ 

Paul G Morris

✓ 4/26/2013

DATE

(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.)

Paul G Morris
Name of signee

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TALLAHASSEE, FLORIDA