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(Re	questor's Name)			
(Address)				
(Ad	dress)			
(Cit	y/State/Zip/Phone) #)		
PICK-UP	☐ WAIT	MAIL .		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
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SECRETARY OF STATE



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 1, 2013

FRANK GARCIA 2318 W COLUMBUS DR TAMPA, FL 33607

SUBJECT: FRANKLYN LLC Ref. Number: W13000043028

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

We are enclosing the proper form(s) with instructions for your convenience.

Limited Liability Companies are not corporations. Limited Liability Companies are unique business entities with special characteristics and attributes formed under Chapter 608, Florida Statutes. Corporations, on the other hand, are formed under Chapter 607, Florida Statutes, and possess other distinctive traits, and characteristics. Consequently, limited liability company documents cannot contain any references/terms which may implicate the entity is a corporation. Please delete any references to the term "corporation" or the like from your or document.

Chapter 608, Florida Statutes, does not allow limited liability companies to issue shares or stock. Consequently, limited liability company documents cannot contain any references/terms which may implicate otherwise. Please deleterany references to terms such as "shares," "stock," "stockholders," "shareholders" or the like from your document.

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.

Tammi Cline Regulatory Specialist II

Letter Number: 113A00018517

COVER LETTER

TO: Registration of Division of	on Section f Corporations			
SUBJECT:	Franklyn Ll Name of Limit	ed Liability Company		
The enclosed Artick	es of Organization and fee(s) are	submitted for filing.		
Please return all cor	respondence concerning this matt	er to the following:		
	Frank Conrci	Name of Person	 -	
	Franklyn L	LC Firm/Company		
	2318 W Col	Lumbus Dr Address		
	Tampa, FL	33607 Sy/State and Zip Code Of future annual report notification)		
	Frank. garcia E-mail address: (to be used	of future annual report notification)	om	
For further information concerning this matter, please call:				
Frank	Corcia ame of Person	at (<u>\$13</u>) <u>254 - /</u> Area Code & Daytime Telep	1072 hone Number	
Enclosed is a chec	ck for the following amount:			
\$125.00 Filing Fe	ce □\$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	Street/Courier Address Registration Section Division of Corporations	2013 AUG SECRETA TALLAHAS	

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

RETARY OF STATE

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Articles of Organization

The undersigned, for the purpose of forming a Florida profit LLC, hereby adopts the following Articles of Organization:

Franklyn LLC

Article I

The name of the Limited Liability Company is: Franklyn LLC

Article II

The principal place of business address:

2318 W Columbus Dr. Tampa, FL 33607

The mailing address of the business is:

2318 W Columbus Dr. Tampa, FL 33607

Article III

The purpose for which this LLC is organized is:

Purchase and rental of realestate.

Article IV

The name and Florida Street address of the registered agent is:

Frank John Garcia 2318 W Columbus Dr Tampa, FL 33607

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature:

SECRETARY OF STATE

Article VI

The initial officer(s) and/or director(s) of the LLC is/are:

Title: Manager

Frank John Garcia 2318 W Columbus Dr Tampa, FL 33607

Title: Managing Member

Lynette Garcia 2318 W Columbus Dr Tampa, FL 33607

Required Signature:

Typed name of signee: Frank John Garcia

(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.)

3 AUG 16 PM 12: 13