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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
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J. SAULSBERRY EXAMINER

AUG 19 2013

COVER LETTER

	tion Section of Corporations			
SUBJECT:	SEAR Properties LLC	, h . 7s		
	Name of Limited L	ability Company		
The enclosed Arti	cles of Organization and fee(s) are subm	itted for filing.		
Please return all c	orrespondence concerning this matter to	the following:		
Sean	Vewman			
<u></u>	Nan	ne of Person		
	•			
	Fin	n/Company	**	
227	5 1/ 1			2013
<u>55 1</u>	Swansea Court			72
		Address		o,
Oviedo	, FL 32765			==
	City/Sta	te and Zip Code	2.1	
Seann	ewn ogmailocom			양 - 22
	cum agmails com JE-mail address: (to be used for fu	ure annual report notification)	,	
	nation concerning this matter, please call			
Sean Newn	•.	ling of in		
Jean Ivewn	Name of Person at	407 971 - 154 Area Code & Daytime Telep	hone Number	
		у - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		
	eck for the following amount:			
□\$125.00 Filing	Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fe Certificate of Stat Certified Copy (additional copy is en	us &
	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 Claration Tallahassee, FL 32301	ircle .	,

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nan	ie:		
The name of the Li	mited Liability Company is:	·	·
	Properties LLC st end with the words "Limited Liability Control	Company, "L.L.C.," or "LLC.")	· , · · ·
ARTICLE II - Ad The mailing addres	dress: s and street address of the princ	ipal office of the Limited Li	ability Company is:
Principal Office A	ddress:	Mailing Address:	
337 Swansea	Cart	337 Swansea Court	
Oviedo, FL 32		Oviedo, FL 32765	
(The Limited Liability Co business entity with an a		stered agent are: at † s (P:O. Box NOT acceptable)	s Signature: idual or another 2013 AUG 16 AM 8: 25
	Oviedo, F	EL 32765 and Zip	J. 01
liability compar registered agent d all statutes relati	d as registered agent and to accept at the place designated in this and agree to act in this capacity. Ing to the proper and complete pligations of my position as regis Registered Agent's Signature	sept service of process for the certificate, I hereby accept to I further agree to comply we serformance of my duties, and tered agent as provided for i	he appointment as with the provisions of A I am familiar with

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:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGR	Sean Newman 337 Swanzen Coust Oviedo, FL 32765	
MGRM	Rebecca Newman 337 Swansen Court Ovirdo, FL 32765	
WARREN - 100 A A COLOR		2613 NUG 16
(Use attachment if necessary)		AM & 25
TICLE V: Effective date, if other than the an effective date is listed, the date must or to or 90 days after the date of filing.) REQUIRED SIGNATURE:	e date of filing: t be specific and cannot be more t	(OPTIONAL) han five business d
Stan	Human er or an authorized representative of a me	ambar
(In accordance with section 608 constitutes an affirmation under I am aware that any false inform	3.408(3), Florida Statutes, the execution of the penalties of perjury that the facts stated nation submitted in a document to the Departy as provided for in s.817.155, F.S.)	his document herein are true.
Sean New	wman ped 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)