# L17000117757

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Document Number)
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## **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: BROWN NUMBER FIVE, 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:

LINDA BROWN		
	Name of Person	
	Firm/Company	
1 BEACH DRIVE S.E. #1702		
	Address	
ST. PETERSBURG, FLORID	A 33701	
	City/State and Zip Code	
lindab@remax.net	AS 13	
E-mail address: (to	ે. જુકાર્યું <b>૦</b>	Lew Services
LINDA BROWN	at (727 ) 823-6995	E C
Name of Person	at (727 ) 823-6995	THE PARTY OF
Enclosed is a check for the following amo	ount:	
□\$125.00 Filing Fee □\$130.00 Filing I Certificate of St		

#### **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

RTICLE I - Nam	e
RTICLE I - Nam	e

The name of the Limited Liability Company is:

### BROWN NUMBER FIVE, 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:	Mailing Address:
1 Beach Drive S.E. #1702	1 Beach Drive S.E. #1702
St. Petersburg, FL 33701	St. Petersburg, FL 33701

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:

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 empirete 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..

egistered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Me	Name and Address:
MGRM	Linda Brown
	1 Beach Drive S.E. #1702 St. Petersburg, FL 33701
MGRM	Richard H. Brown  1 Beach Drive S.E. #1702
	St. Petersburg, FL 33701
(Use attachment if necessar	<i>'</i> )
	er than the date of filing: (OPTIONAL)
LE V: Effective date, if oth	er than the date of filing: (OPTIONAlate must be specific and cannot be more than five busine
LE V: Effective date, if other of the feetive date is listed, the or 90 days after the date of	er than the date of filing: (OPTIONAl late must be specific and cannot be more than five busines filing.)
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LE V: Effective date, if other or 90 days after the date of the date of the date of the days after the date of the days after	er than the date of filing:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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