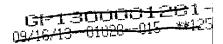
L17000132539

(Requestor's Name)
(Address)
(Address)
(tourses)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
•
(Business Entity Name)
(Document Number)
(Secument Names)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·

Office Use Only



600251615596



600251615596 09/16/13--01028--015 **125.00



J. Sithvora SEP 1.9 2003

COVER LETTER

TO: Registration Section **Division of Corporations** The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Firm/Company Riverbank Terrace Brodenton, FL 34512 City/State and Zip Code Dard @ tampa bay - 1-1, com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount: **△**\$125.00 Filing Fee □\$130.00 Filing Fee & ☐ \$160.00 Filing Fee □\$155.00 Filing Fee & Certificate of Status Certificate of Status & Certified Copy Certified Copy (additional copy is enclosed) (additional copyris 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

A	R	TI	CI	Æ	I	- }	ľ	ame	
---	---	----	----	---	---	-----	---	-----	--

The name of the Limited Liability Company is:

Northgate Commercial Center LLC
(Myst 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:
10807 Riverbank Ten	1767 Lakewood Ranch
Bradenton, Ferida	Blvd Rox 280
345-12	Lakewood Ranch, FL 34212

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:

Walt Eppard	\$ Out		
Kame	→ (**	င်္သ	
10807 Riverbank Ter		SEP	Transference
Florida street address (P.O. Box NOT acceptable)			متند بھر رہ ا
Bradenton 11 34212			
City. State, and Zip		<u> </u>	11:11:00

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, F.S.

Registered Agent's Signatur (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:		
MGR	Walt Eppard, 10x01 Riverbank Ter, Bradenton, Fl 34512	 	
MGRM	Rence Eppard 10807 River bank TER Bradenton, FL34212		
		- - -	
		- 	
(Use attachment if necessary)		- 	
CLE V: Effective date, if other than	n the date of filing: (OPTIO	ONA:	I.
CLE V: Effective date, if other than effective date is listed, the date is	nust be specific and cannot be more than five bu	ONA:	I. s
CLE V: Effective date, if other than effective date is listed, the date is to or 90 days after the date of filing REQUIRED SIGNATURE:	nust be specific and cannot be more than five but	ONA sines	I.s
CLE V: Effective date, if other than effective date is listed, the date is to or 90 days after the date of filing REQUIRED SIGNATURE:	nust be specific and cannot be more than five but	ONA sines	I.
CLE V: Effective date, if other than effective date is listed, the date is to or 90 days after the date of filing REQUIRED SIGNATURE: Signature of a me (In accordance with section constitutes an affirmation of a management of the constitutes at third degree feet.)	nust be specific and cannot be more than five bu	sines 13 SEP 18 AM 10: 47	I.s

of Registered Agent
S 30.00 Certified Copy (Optional)
S 5.00 Certificate of Status (Optional)