# L13 000140711

(Re	equestor's Name)	
(Ad	ldress)	
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(Ad	dress)	
(Cit	ty/State/Zip/Phone	<del>:</del> #)
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	· · · · · · · · · · · · · · · · · · ·
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Office Use Only



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#### COVER LETTER-

TO: Registration Section
Division of Corporations

## SUBJECT: naples residential property management 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:

i icase return an corresp		er to the following	<b>ś</b> ·		
bryant	hyde				
		Name of Person	<del></del>		
naples	residential pro	operty m	anagen	nent L	
	····	Firm/Company			
1381 5	th ave n				
		Address			
naples,	34102				
		ty/State and Zip Cod	le		<del></del>
bryant hyd	de@gmail.com			40000	
	E-mail address: (to be used	for future annual rep	ort notification)	in the	ω
For further information	concerning this matter, please	call:			
bryant hyd	е	<sub>at (</sub> 239	45006	50	1 1-130
Name	of Person	Area Cod	e & Daytime Teler	ohone Number	- <u>- 1</u>
Enclosed is a check f	or the following amount:				္ကာ ျ လ <b>အ</b>
\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filis Certified Co (additional cop	ору	\$160.00 Filing 1 Certificate of St Certified Copy (additional copy is	atus &
	Mailing Address Registration Section		Courier Address tion Section		

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Compan	ıy is:
naples residential property management LaLS	• ~
	Liability Company, "L.L.C.," or "LLC.")
ADTICLE II Address	
ARTICLE II - Address: The mailing address and street address of the	he principal office of the Limited Liability Company is:
The maning address and sheet address of a	no principal office of the Billion Blashing Company to
Principal Office Address:	Mailing Address:
1381 5th ave n	1381 5th ave n
naples	naples
34102	34102
business entity with an active Florida registration.)  The name and the Florida street address of  bryant hyde	Registered Agent. You must designate an individual or another  the registered agent are:
	Name
1381 5th ave n.,	
	eet address (P.O. Box NOT acceptable)
naples, 34102	Lagrant and the second of the second
	ity, State, and Zip
	the same same
liability company at the place designate registered agent and agree to act in this c all statutes relating to the proper and cor	nd to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as capacity. I further agree to comply with the provisions of mplete performance of my duties, and I am familiar with as registered agent as provided for in Chapter 608, F.S
Parietared A contin	Signature (REQUIRED)
Registered Agent's	Signature (REQUIRED)
(CON	NTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager "MGRM" = Managing Member  MGRM	
Ų Ų	•
MGRM	
	bryant hyde
	1381 5th ave n
	naples,34102
	<del>- 12 / 12 / 12 / 12 / 12 / 12 / 1</del>
	Provided to
ffective date is listed, the date must	date of filing: (OPTIONA be specific and cannot be more than five busines
ffective date is listed, the date must	
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effective date is listed, the date must or 90 days after the date of filing.)	
effective date is listed, the date must or 90 days after the date of filing.)	
effective date is listed, the date must or 90 days after the date of filing.)  REQUIRED SIGNATURE:	be specific and cannot be more than five busines
effective date is listed, the date must or 90 days after the date of filing.)  REQUIRED SIGNATURE:	be specific and cannot be more than five busines
effective date is listed, the date must or 90 days after the date of filing.)  REQUIRED SIGNATURE:  (In accordance with section 608.4 constitutes an affirmation under the date of a management of a managemen	be specific and cannot be more than five busines

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

- \$ 5.00 Certificate of Status (Optional)