13000/50583

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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(Business Entity Name)
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(Document Number)
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SECRETARY OF STATE
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FLORIDA DEPARTMENT OF STATE Division of Corporations

October 9, 2013

JEANNE SMITH 1820 SHAWNEE TRAIL MAITLAND, FL 32751

SUBJECT: TIDEWATER PROPERTIES, LLC

Ref. Number: W13000056160

We have received your document for TIDEWATER PROPERTIES, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filled and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as it is not distinguishable from the name of an existing entity. Section 608.406; Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company", "L.C.", and "LC".

The document number of the name conflict is L03000026837.

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: 613A00023691

COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	dewater Pr	operties LL@	<u>)</u> .
The enclosed Articles of	f Organization and fee(s) are	submitted for filing.	
Please return all corresp	ondence concerning this matt	er to the following:	
<u> </u>	eanne Smit		
_	_	Name of Person	
	idewater P	roperties LL	<u>.</u>
		· ·	2913 FALL
•	820 SNAW	nee Trail	<u> </u>
		Address	24 T
	MaiHand	た 3275 y/State and Zip Code	
jean	E-mail address: (to be used f	or future annual report notification)	Com Ball to
	concerning this matter, please		
<u> </u>	Smi+M of Person	at (407) 276- Area Code & Daytime Telep	7803 hone Number
Enclosed is a check for	or the following amount:		
□\$125.00 Filing Fee	□\$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 P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, FL 32301	ircle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Life	mited Liability Company	is: Jr 3 Frope	rales, LLC	∕ .
<u> </u>	K2 TYNGZEWY	ents, Lle		
_ trach	Jater Prope	vice LLL		
(Mus	st end with the words "Limited Li	iability Company, "L.L.C.," or "Ll	LC.")	
ARTICLE II - Add	draes:			
		principal office of the Li	mited Liability Com	nany is:
		· pp o o		puny is.
Principal Office A	ddress:	Mailing Address:		
1800 Slade	was Too'l			
1820 Shau	Syke mad	Saml		
Truffiaria	32751	Jarra		
		 	32 C3	20
ARTICLE III - Re	gistered Agent, Register	red Office, & Registered	Agent's Signature	
(The Limited Liability Cor business entity with an ac	mpany cannot serve as its own Re ctive Florida registration.)	egistered Agent. You must designa	te an individual or another	7
TEL LA D	1 11	•	第三章 第三章	
The name and the F	lorida street address of th	e registered agent are:		3
_	Jeanne Sn	1 ith	프를 프로	35.47
	. Nar	me		۲ <u>.</u>
	1820 Snawn	ee Trail	se ^e	
•		address (P.O. Box NOT accep	— otable)	
	Maitland,	\$ FL 32751		
-		State, and Zip	_	
	Ç.i.y,			

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 Signature (REQUIRED)

(CONTINUED)

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Jeanne Smith 1820 Snawnee Trail Maitland Fe 32751
MGRM	David Smith 1920 Snawner Trail Maitland, Fr 32751
MGRM	Mac Vann Smith 1820 Shawner Trail Maitland, F. 32751
	
· ·	n the date of filing: (OPTION
LE V: Effective date, if other that fective date is listed, the date for 90 days after the date of filing.	must be specific and cannot be more than five busin
LE V: Effective date, if other that fective date is listed, the date for 90 days after the date of filing.	must be specific and cannot be more than five busin
LE V: Effective date, if other that fective date is listed, the date is or 90 days after the date of filing REQUIRED SIGNATURE:	must be specific and cannot be more than five busin
rective date is listed, the date of or 90 days after the date of filing recorded at the date	must be specific and cannot be more than five busing.)

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

Filing Fees: