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J. SAULSBERRY EXAMINER OCT 25 2013

### **COVER LETTER**

TO: Registration Section **Division of Corporations** uwannee Valley Investigations, 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: Jeffrey D. Charles Name of Person Suwannee Valley Investigations Firm/Company 259 SW Silver Palm Dr Lake City, FL 32024 City/State and Zip Code jdcharles@live.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Jeffrey Charles Name of Person Enclosed is a check for the following amount: □\$125.00 Filing Fee \$130.00 Filing Fee & ■\$155.00 Filing Fee & ■ \$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (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 Circle
Tallahassee, FL 32301

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

SUWANNEE VALLEY INVESTIGATIONS, LLC.  (Must end with the words "Limi	ed Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
	f the principal office of the Limited Liability Company is	:
Principal Office Address:	Mailing Address:	
259 SW SILVER PALM DR	259 SW SILVER PALM DR	
LAKE CITY, FL 32024	LAKE CITY, FL 32024	
ARTICLE III - Registered Agent, Reg	istered Office. & Registered Agent's Signature:	
(The Limited Liability Company cannot serve as its or business entity with an active Florida registration.)	istered Office, & Registered Agent's Signature: on Registered Agent. You must designate an individual or another of the registered agent are:	
(The Limited Liability Company cannot serve as its or	wn Registered Agent. You must designate an individual or another	
(The Limited Liability Company cannot serve as its or business entity with an active Florida registration.)  The name and the Florida street address	wn Registered Agent. You must designate an individual or another	**************************************
(The Limited Liability Company cannot serve as its or business entity with an active Florida registration.)  The name and the Florida street address	of the registered agent are:	
(The Limited Liability Company cannot serve as its or business entity with an active Florida registration.)  The name and the Florida street address  JEFFREY D. CHARLES  259 SW SILVER PALM D	of the registered agent are:	
(The Limited Liability Company cannot serve as its or business entity with an active Florida registration.)  The name and the Florida street address  JEFFREY D. CHARLES  259 SW SILVER PALM D	Name  Name  Registered Agent. You must designate an individual or another  Name  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 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..

Begistered Agent's Signature (REQUIRED)

(CONTINUED)

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	JEFFREY D. CHARLES  259 SW SILVER PALM DR  LAKE CITY, FL 32024
<del></del>	
(Use attachment if necessary)	·
LE V: Effective date, if other	than the date of filing: (OPTIONAL
effective date is listed, the date of f	te must be specific and cannot be more than five business

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

JEFFREY D. CHARLES

Typed 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)