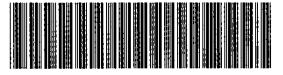
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(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	WAIT .	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	<u>.</u>
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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1734 Main Street Sarasota, FL 34202 Office: 941.556.9100 Fax: 941.552.1275

Direct: 941-650-4779

www.AtchleyRealty.com

November 13, 2013

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

To whom it may concern:

I have enclosed our application to form a Florida Limited Liability Company for Atchley Referral Network, LLC, along with our check in the amount of \$125.00 for the Filing Fee for the Articles of Organization and Designation of our Registered Agent.

Please contact the undersigned at 941-556-9100 if you have any questions.

Cori Cruz

Office Manager

Atchley International Realty, LLC

## **COVER LETTER**

TO: Registration Division of C			
SUBJECT:	Atchley Refe	ed Liability Company	<u>.c.</u>
The enclosed Articles	of Organization and fee(s) are s	submitted for filing.	
Please return all corres	pondence concerning this matt	er to the following:	
	Alan Atc	Name of Person	
	Atchley	Referral Networl	K, LLC
	[734 M	ain Street	
	Sarasota		,
	Cit Glanatchl E-mail address: (to be used t	F1. 34236 y/State and Zip Code ey a atchley realty, or future annual report notification)	, com 3
For further information	concerning this matter, please		P
Alan	Atchley e of Person	at ( 941 ) 720-1641 Area Code & Daytime Telephone Number	The street
,	for the following amount:		
\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	e of Status &
	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:** 

The name of the Limited Liability Company is:

Atchley Referr (Must end with the words "Limited Liability	al Network, L.L.C.
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1734 Main St. Sarasota Fl 34236	1734 Main St. Sarasota Fi 34236
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	
The name and the Florida street address of the re	gistered agent are:
Atchley Interi	
1734 Main	Street
	ress (P.O. Box NOT acceptable)
Sarasota City, Stat	ress (P.O. Box NOT acceptable)  FL 34236  te, and Zip
Having been named as registered agent and to a	sccept 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 (REQURED)

(CONTINUED)

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

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Mana; "MGRM" = Ma		Name and Address:		
MGR		Alan L. Atchley 1734 Main Stree Sarasota Fi 342	† 36	
(Use attachment	• /	do of Clina.	(ODTION	JAKN
(If an effective date is prior to or 90 days after	listed, the date must be	te of filing:  e specific and cannot be more than	five busin	iess days
<u>REOUIRED</u> SI	GNATURE:			
	Alm	L. Serdley		02 3
	Signature of a member or	r an authorized representative of a membe	er.	1 mg - 1 s
consti I am a	tutes an affirmation under the ware that any false information	8(3), Florida Statutes, the execution of this dependities of perjury that the facts stated here on submitted in a document to the Departmer provided for in s.817.155, F.S.)	ocument in äre true.	4 ( ) ( ) ( ) ( ) ( )
	Alan L 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)