Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **37

> FLORIDA LIMITED LIABILITY CO. STEPHEN RYLANDER LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

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Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nume: The name of the Limited Liability Company	is:	
STEPHEN RYLANDER, LLC	the state of the s	
(Must and with the mount, Frithfoot 19	isbility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the	principal office of the Limited Liabili	ty Company is:
Principal Office Address:	Mailing Address;	
110 CHESTNUT ST	110 CHESTNUT ST	
LEESBURG, FL 34748	LEESBURG, FL 34748	
ARTICLE III - Registered Agent, Registe (The Limited Liability Company cannot serve as its own Rebusiness ontity with an active Florida registration.)	red Office, & Registered Agent's Sig gistered Agent You must designate at individual o	or another Si
The name and the Florida street address of the	ne registered agent are:	107 2 101 2
STEPHEN RYLANDER		, S.
Na	me	77
110 CHESTNUT ST		32
Florida street	address (P.O. Box NOT acceptable)	<i>س</i> ے نے ا
LEES BURG	FL 34748	4.
	, State, and Zip	

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..

(CONTINUED)

Registered Agent's Mignature (REQUIRED)

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:

effective date is listed, the date must be specific and capnot be more than five busines	Title:			Name an	d Address:				
(Use attachment if necessary) (Use attachment if necessary) LEV: Effective date, if other than the date of filing: (OPTIONA effective date is listed, the date must be specific and cannot be more than five business or 90 days after the date of filing.) REQUIRED SIGNATURE: (In accordance with section 608 408(3), Plorida Statutes, the execution of this document constitutes at any files information submitted in a document to the Department of State constitutes at third degree follows as provided for in s.817.155, F.S.) STEPHEN RYLANDER Typed or prioted name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certificate Oxyy (Optional) \$ 5.00 Certificate of States (Optional)									
(Use attachment if necessary) CLE V: Effective date, if other than the date of filing: (OPTIONA effective date is listed, the date must be specific and cannot be more than five business or 90 days after the date of filing.) REQUIRED SIGNATURE: (In accordance with section 608 408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penaltics of perjury that the facts stated herein are true, I am aware that my dates information submitted in a document to the Department of State constitutes a third degree fellows as provided for in s.817.155, F.S.) STRPHEN RYLANDER Typed or prioted name of signee Elling Feer: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certificate Of Status (Optional) \$ 5.00 Certificate of Status (Optional)	"MGRM	" = Managing !	Member						
(Use attachment if necessary) LE V: Effective date, if other than the date of filing:	MGRM			STEPHEN	RYLANDER				
(Use attachment if necessary) LE V: Effective date, if other than the date of filing:				110 CHEST	TNUT ST				
CLE V: Effective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be more than five business or 90 days after the date of filing.) REOURED SIGNATURE: (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 a.817.155, F.S.) STEPHEN RYLANDER Typed or pricted name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certificate of Status (Optional)				LEESBURG	3, FL 3474B				
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