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PICK-UP WAIT MAIL			
(Business Entity Name)			
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Certified Copies Certificates of Status	_		
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COVER LETTER

Name of Limited Liability Company

TO:

Registration Section
Division of Corporations

SUBJECT: Palmetto Rental Property LLC

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Beth A Stoner EA

Name of Person

EZ Tax Solutions Inc

Firm/Company

2975 Bee Ridge Road Ste D

Address

Sarasota FL 34239

City/State and Zip Code

beth@eztaxsolutions.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Beth A Stoner EA

..,941

923-8290

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for 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 Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY **ARTICLE I - Name:** The name of the Limited Liability Company is: Palmetto Rental Property LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.") **ARTICLE II - Address:** The mailing address and street address of the principal office of the Limited Liability Company is: **Principal Office Address:** Mailing Address: 215 10th St W PO Box 15171 Palmetto FL 34221-3941 Sarasota FL|34277-1171 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: EZ Tax Solutions Inc Name 2975 Bee Ridge Road Ste D Florida street address (P.O. Box NOT acceptable) Sarasota FL 34239 City, 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.. Registered Agont'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:

Title:	Name and Address:	
"MGR" = Manager "MGRM" = Managing Member	; ;	
MGRM	Michelle Sims	
	PO Box 15171	
	Sarasota FL 34277	
MGRM	Marlena Rodriguez	
	PO Box 15171	
	Sarasota FL 34277	
		
(Use attachment if necessary)		1
vor nor nor at the total at all	1	(OPTIONAL)
ICLE V: Effective date, if other than the effective date is listed, the date must		(OPTIONAL)
r to or 90 days after the date of filing.)		man nve business days
to or youngs after the date of image,		
		No. America
REQUIRED SIGNATURE:	٨ ٣	
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Signature of a memi	per or an authorized representative of a m	ember. 🚃 😘
constitutes an affirmation und I am aware that any false info	08.408(3), Florida Statutes, the execution of er the penalties of perjury that the facts stated remation submitted in a document to the Depany as provided for in s.817.155, F.S.)	l herein are true.
Michelle Sims	MICHELLE SIMS Typed or printed name of signee	
Filing Fees:	•	:

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

- \$ 5.00 Certificate of Status (Optional)