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(Signature)

Law Offices of

WILLIAM J. KIMPTON, PA

605 Palm Boulevard, Suite B
Dunedin, FL 34698

Telephone: (727) 733-7500
FAX: (727) 733-7511
email: bill@kimptonlaw.com

January 15, 2014

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

VIA FEDERAL EXPRESS

Re: Emerson Square, LLC
Articles of Organization

To Whom It May Concern:

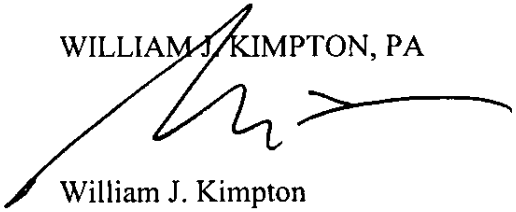
Enclosed are proposed Articles of Organization for the above. We notice on your website that the initials "UA" are not included, so we believe this name is available. **If there is any issue with this, please call me or Jayne at this office, as we are intending to use this company in a pending closing.**

Please file the enclosed Articles and return the certified copy to us at this address. We have enclosed our check in the amount of \$155.00 to cover the cost of same.

Thank you in advance for your attention to this matter.

Very truly yours,

WILLIAM J. KIMPTON, PA



William J. Kimpton

WJK:jll

Enclosures

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

EMERSON SQUARE, 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:

1153 Main Street, Suite 109
Dunedin, FL 34698

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Dunedin, FL 34698

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:

Michael Valentine

Name

1153 Main Street, Suite 109

Florida street address (P.O. Box NOT acceptable)

Dunedin

City

FL 34698

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 605, F.S..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Michael Valentine

1153 Main Street, Suite 109

Dunedin, FL 34698

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), 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.)

Michael Valentine

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)