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(Requestor's Name)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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Certified Copies Certificates of Status			
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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: 6968 Manatee Drive, L.L.C.			
Name of Lis	mited Liability Company		
The enclosed Articles of Organization and fee(s) a	re submitted for filing.		
Please return all correspondence concerning this m	natter to the following:		
John A. Thompson			
	Name of Person		
	Firm/Company		
_7714 Gingerbread Lane			
	Address		
F : 6			
Fairfax Station, VA 22039	City/State and Zip Code		
ThompLaw@outlook.com	d for future annual report notifica	*(an)	
·	•	tion)	
For further information concerning this matter, ple	ase call:		
	703) 582-7703	<u>.</u>	
Name of Person	Area Code Daytime Tel	ephone 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	\$160.00 Filing Fee, Certificate of Status &	
\$5.00 Certificante of Status	(additional copy is enclosed)	Certified Copy (additional copy is enclosed)	
Mailing Address	Street/Courier Addr	<u>ess</u>	
Registration Section Division of Corporations	Registration Section Division of Corporati	ons	
P.O. Box 6327	Clifton Building		
Tallahassee, FL 32314	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:		·
6968 Manatee Drive, L.L.C.		
(Must end with the words "	Limited Liability Company, "L.L.C.," or "L	.LC.")
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Compa	any is:
Principal Office Address:	Mailing Address:	•
7714 Gingerbread Lane	7714 Gingerbread Lane	
Fairfax Station, VA 22039	Fairfax Station, VA 22039	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as another business entity with an active Florida reg	its own Registered Agent. You must design gistration.)	ate an individual or
The name and the Florida street address of the re	gistered agent are:	
John A. Thompson	Name	
6819 Tidewater Drive Florida street address (P	P.O. Box <u>NOT</u> acceptable)	
<u>Navarre</u> City	FL 32566 Zip	
Having been named as registered agent and to a the place designated in this certificate, I hereb capacity. I further agree to comply with the pro of my duties, and I am familiar with and accep	by accept the appointment as registered agent evisions of all statutes relating to the proper a	t and agree to act in this and complete performance
Registered Agent	s Signature (BEQUIRED)	14 TALL
(COI	NTINUED)	MAY 15
P	tage 1 of 2	AM 9: 58

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "AMBR" = Authorized Member "MGR" = Manager AMBR John A. Thompson 7714 Gingerbread Lane Fairfax Station, VA 22039 <u>AMBR</u> Shawna M. Thompson 7714 Gingerbread Lane Fairfax Station, VA 22039 AMBR Margaret A. Thompson 7714 Gingerbread Lane Fairfax Station, VA 22039 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (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. None . **REQUIRED SIGNATURE:** Signature of a member of 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.) John A. Thompson Typed or printed name of signee Filing Fees:

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)