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COVER LETTER

то:	Registration Division of C			
SUBJI	ECT: <u>2852 D</u>	emaret Drive LLC Name of Lin	nited Liability Company	
The en	closed Articles	of Organization and fee(s) ar	re submitted for filing.	
Please	return all corre	spondence concerning this m	atter to the following:	
	Jerry W.	Allender	Name of Person	
	Allender	& Allender, PA		
	7 (101,195)	G. M. S. C.	Firm/Company	
	719 Gard	den Street	Address	
	Titusville	Florida 32796	City/State and Zip Code	
_		E-mail address: (to be use	d for future annual report notifica	ation)
For fu	ther information	n concerning this matter, plea	ase call:	
Jerry	W. Allender Nan	at (_: ne of Person		lephone Number
Enclos	sed is a check fo	r the following amount:		
□ \$125.0	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)
			Stand Country Add	4005

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:

2852 Demaret Drive 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:

2625 Riviera Drive Titusville, Florida 32780 2625 Riviera Drive Titusville, Florida 32780

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Michael A. Boffo		_	
Name			
			7
2625 Riviera Drive			JUL 2
Florida street address (P.O. Box NOT acceptable)		9 11	.2
Titusville	32780	¥., —	III.
City	Zip	12	1 ا

Registered Agent's Signature (REQUIRED)

ARTICLE IV -

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

Title:	Name and Address:			
"AMBR" = Authorized Member				
"MGR" = Manager				
AMBR	Michael A. Boffo			
	2625 Riviera Drive			
	Titusville, Florida 32780			
<u>AMBR</u>	Gordon P. Boffo			
	2625 Riviera Drive			
	Titusville, Florida 32780			
AMBR	Matthew S. Boffo			
	2625 Riviera Drive			
	Titusville, Florida 32780			
ARTICLE V: Effective date, if oth	ner than the date of filing:			_•
(OPTIONAL)		•		
		, . 	14 JUL 2	
ARTICLE VI: Other provisions, i	f any:		Ē	
A member managed LLC		*.	2	 -
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REQUIRED SIGNATURE:		·	္က်	-
Wal Gara		: ; .		
Signature of a member or a	outhorized representative of a n	nember.	,	
Michael A. Boffo				
 	orinted 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)