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M. Meredith Kirste, P.A.

ATTORNEY AT LAW

7928 U.S. Highway 441, Suite 3
LEESBURG, FL 34788-8206

M. MEREDITH KIRSTE

TELEPHONE
(352) 326-3455

FAX
(352) 365-0055

August 12, 2014

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

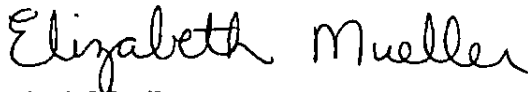
RE: Articles of Organization for Dock Options, LLC

To Whom It May Concern:

Enclosed please find a cover letter, Articles of Organization for Dock Options, LLC, a copy of the Articles of Organization, and a check for \$155.00 made out to Florida Department of State. The check covers the Filing Fee and a certified copy. A copy of the Articles of Organization is included. I have also enclosed a self-addressed, postage paid envelope so that the certified copy can be returned to our office.

If you have any questions regarding this matter, please contact me.

Sincerely yours,



Elizabeth Mueller
Secretary to M. Meredith Kirste

Enclosures

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Dock Options, LLC
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Elizabeth Mueller

Name of Person

M. Meredith Kirste, P.A.

Firm/Company

7928 U.S. Highway 441, Suite 3

Address

Leesburg, FL 34788-8206

City/State and Zip Code

receptionist803@earthlink.net

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

For further information concerning this matter, please call:

Elizabeth Mueller

Name of Person

at (352)

Area Code

326-3455

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:

Dock Options, 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:

30733 Williams Street
Leesburg, FL 34748

30733 Williams Street
Leesburg, FL 34748

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:

Clay Bell

Name

30733 Williams Street

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

Leesburg

FL

34748

City

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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FILED
CLAY BELL

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

AMBR / MGR

Clay Bell

30733 Williams Street

Leesburg, FL 34748

(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.)

CLAY BELL

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)

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