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| (Re                     | equestor's Name)   |           |
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| (Δο                     | ldress)            |           |
| (/10                    | arcas)             |           |
| (Cit                    | ty/State/Zip/Phone | e #)      |
| PICK-UP                 | ☐ WAIT             | MAIL      |
| (0.                     |                    |           |
| (BL                     | isiness Entity Nan | ne)       |
| (Do                     | ocument Number)    |           |
| Certified Copies        | _ Certificates     | of Status |
| Special Instructions to | Filing Officer:    |           |
|                         |                    |           |
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TILED 2014 SEP 16 PH 12: 07

K.SALY EXAMINER SEP 23 2014 September 12, 2014

Re: Registration

**Dear Florida Department of State:** 

Enclosed you shall find application to register Your Real Estate Junction, "LLC." the following is the contact information:

Contact person:

Kathleen M Bourke

Mailing Address:

PO BOX 1076, Flagler Beach, FL 32136

Physical Address:

2570 Lakeshore Drive, Flagler Beach, FL 32136

Phone contact:

(386) 986 - 9825

Sincerely,

Kathleen M Bourke

## **COVER LETTER**

| TO:       | Registration<br>Division of ( | n Section<br>Corporations                    |   |  |
|-----------|-------------------------------|--|---|--|
| SUBJE     | ECT: Your Re                  | al Estate Junction "LLC."                    |   |  |
|           |                               | Name of Lin                                  | mited Liability Company   |  |
| The en    | closed Articles               | of Organization and fee(s) a                 | re submitted for filing.  |  |
| Please    | return all corre              | spondence concerning this m                  | natter to the following:  |  |
|           | Kathleen I                    | M Bourke                                     |   |  |
|           |                               |  | Name of Person  |  |
|           | Your Real                     | Estate Junction "LLC."                       |   |  |
|           |                               |  | Firm/Company  |  |
|           | PO Box10                      | 076  |   |  |
|           |                               |  | Address   |  |
|           | Flagler Be                    | ach, Florida 32136                           |   |  |
|           |                               | C  | City/State and Zip Code   |  |
| <u>bo</u> | urke.kathleen@                | yahoo.com<br>E-mail address: (to be use      | d for future annual report notifica                                 | ation)   |
| For fur   | ther informatio               | on concerning this matter, plea              | ase call:   |  |
| Kathlee   | n M Bourke                    | at ( S                                       | 386 ) 986-9825  |  |
|           |                               | ne of Person                                 |   | lephone Number   |
| Enclose   | ed is a check fo              | or the following amount:                     |   |  |
| □ \$125.0 | 0 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) |
|           | <u>Ma</u>                     | iling Address                                | Street/Courier Add  | <u>ress</u>  |

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

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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ANTICIADO ONGA MATION FOR EL  | COMPARATION AND AND AND AND AND AND AND AND AND AN   |
|---|--|
| ARTICLE I - Name:   |  |
| The name of the Limited Liability Company is:   |  |
| ,,,,,,,,,,,   | \$0 En   |
|   |  |
| Your Real Estate Junction "LLC."  |  |
| (Must end with the words "Limited L   | iability Company, "L.L.C.," or "LLC.")   |
| ARTICLE II - Address:   | ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~  |
| The mailing address and street address of the principal offi  | ice of the Limited Liability Company is:   |
| Principal Office Address:   | ice of the Limited Liability Company is:   |
| 2570 Lakeshore Drive  | PO BOX 1076  |
| Flagler Beach   | Flagler Beach  |
| Florida 32136   | Florida 32136  |
| another business entity with an active Florida registration.  The name and the Florida street address of the registered a   | ,  |
| Kathleen M Bourke   |  |
| Name  |  |
| 2570 Lakeshore Drive  |  |
| Florida street address (P.O. Box 1  | NOT acceptable)  |
| Flagler Beach   | FL 32136   |
| City  | Zip  |
| the place designated in this certificate, I hereby accept to<br>capacity. I further agree to comply with the provisions of<br>of my duties, and I am familiar with and accept the oblig | ice of process for the above stated limited liability company at the appointment as registered agent and agree to act in this fall statutes relating to the proper and complete performance gations of my position as registered agent as provided for in r 605, F.S |

(CONTINUED)

Page 1 of 2

| <u>Title:</u>   | Name and Address:  |
|---|--|
| "AMBR" = Authorized Member  |  |
| "MGR" = Manager   |  |
| MGR   | Kathleen M Bourke  |
|   | PO BOX 1076  |
|   | Flagler Beach Florida 32136  |
|   |  |
|   | Tr. Je   |
|   | ST. CF. C.   |
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| ***************************************   |  |
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|   |  |
| (Use attachment if necessary)   |  |
| E V: Effective date, if other than the ective date is listed, the date must   | e date of filing: (OPTIONAL) be specific and cannot be more than five business days prior to or 9  |
| E V: Effective date, if other than the ective date is listed, the date must of filing.)   |  |
|   |  |
| EV: Effective date, if other than the dective date is listed, the date must of filing.)  EVI: Other provisions, if any.   |  |
| E V: Effective date, if other than the ective date is listed, the date must of filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:   | be specific and cannot be more than five business days prior to or 9   |
| EV: Effective date, if other than the dective date is listed, the date must of filing.)  EVI: Other provisions, if any.  REQUIRED SIGNATURE:  | be specific and cannot be more than five business days prior to or 9  Log M Vocette  a member or an authorized representative of a member.   |
| LE V: Effective date, if other than the dective date is listed, the date must of filing.)  LE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of (In accordance with section)   | a member or an authorized representative of a member. on 605.0203 (1) (b), Florida Statutes, the execution of this document  |
| LE V: Effective date, if other than the dective date is listed, the date must of filing.)  LE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of (In accordance with section constitutes an affirmation)                        | a member or an authorized representative of a member. on 605.0203 (1) (b), Florida Statutes, the execution of this document a under the penalties of perjury that the facts stated herein are true.  |
| E V: Effective date, if other than the ective date is listed, the date must of filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of (In accordance with section constitutes an affirmation I am aware that any false) | a member or an authorized representative of a member. on 605.0203 (1) (b), Florida Statutes, the execution of this document a under the penalties of perjury that the facts stated herein are true. information submitted in a document to the Department of State |
| E V: Effective date, if other than the ective date is listed, the date must of filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of (In accordance with section constitutes an affirmation I am aware that any false) | a member or an authorized representative of a member. on 605.0203 (1) (b), Florida Statutes, the execution of this document a under the penalties of perjury that the facts stated herein are true.  |
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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)

ARTICLE IV-