

L14000190466

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

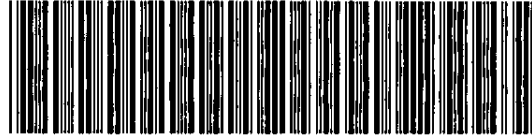
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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11/17/14--01016--008 **125.00

FILED

14 DEC 12 PM 2:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 15 2014

T. BROWN

~~10/4-7/3/5~~

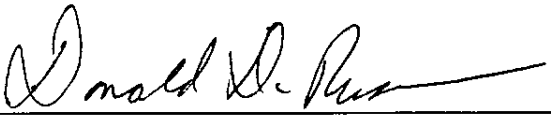
DATE 11/13/14

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

SUBJECT: LINEAGE1 LLC

I have enclosed the original and one copy of the Articles of Organization. You will also find my check for \$125.00 to cover the cost of the Filing Fees and Fee for Registered Agent Designation for the above named LLC.

Sincerely,

X 

DONALD DIRUSSO



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 1, 2014

DONALD DIRUSSO
1702 MCGREGOR RESERVE DR
FORT MYERS, FL 33901

SUBJECT: LINEAGE1 LLC
Ref. Number: W14000071315

RECEIVED
14 DEC 12 AM 10:00
DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

We have received your document for LINEAGE1 LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Teresa Brown
Regulatory Specialist II

Letter Number: 314A00025203

FILED
14 DEC 12 PM 2:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I -Name:

The name of the Limited Liability Company is: LINEAGE1 LLC

ARTICLE II -Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 1702 MCGREGOR RESERVE DR. FT. MYERS, FL. 33901

ARTICLE III -Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are: DONALD DIRUSSO, 1702 MCGREGOR RESERVE DR. FT. MYERS, FL. 33901

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

X Donald A. Russo

Article IV Manager(s) or Managing Member(s)

Title

Name and Address

AMBR

DONALD DIRUSSO
1702 MCGREGOR RESERVE DR.
FT. MYERS, FL. 33901

Article V -Management (Check box if applicable.)

☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager -managed company.

ARTICLE V: Effective Date

The effective date is WHEN FILED

Signature of a member or an authorized representative of a member

X. Donald D. Dirusso

(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.)

DONALD DIRUSSO

Filing Fees:

\$100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)