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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phon	e#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	1
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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SLUREDARY OF STATE

FEB 1 0 2015 **T. BROWN**

COVER LETTER

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TO: Registration Section Division of Corporations		
SUBJECT: 1851 Old Daytona Road, LLC Name of Lim	nited Liability Company	
The enclosed Articles of Organization and fee(s) are	e submitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Chris Chavez	Name of Person	_
1851 Old Daytona Road, LLC	Firm/Company	
	r in the Company	
925 Carter Road	Address	
DeLand, Florida 32724	Sity/State and Zip Code	
	d for future annual report notification)	
For further information concerning this matter, plea	ase call:	
Chris Chavez at (3 Name of Person	Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:		
☑ \$125.00 Filing Fee ☐\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) \$155.00 Filing Fee & Certificate of Statu Certified Copy (additional copy is en	is &
Mailing Address Registration Section Division of Corporations P.O. Box 6327	Street/Courier Address Registration Section Division of Corporations Clifton Building	

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	A
The name of the Limited Liability Company is:	
1851 Old Daytona Road, 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:
, .	70g -
Principal Office Address:	Mailing Address:
925 Carter Rd., DeLand, FL 32724	925 Carter Rd., DeLand, FL 32724
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own R another business entity with an active Florida registration. The name and the Florida street address of the registred a Chris Chavez Name 925 Carter Road	gentare:
Florida street address (P.O. Box 1	NOT acceptable)
DeLand,	FL 32724
City	Zip
the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the oblig	vice of process for the above stated limited liability company at the appointment as registered agent and agree to act in this f all statutes relating to the proper and complete performance gations of my position as registered agent as provided for in the foot. F.S

(CONTINUED)

Page 1 of 2

<u>itle:</u>	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	
MBR	Chris Chavez
	925 Carter Road
	DeLand, FL 32724
MBR	Sandra Chavez
	925 Carter Road
	DeLand, FL 32724
	50201101, 12 021 21
Use attachment if necessary) CV: Effective date, if other than the date ctive date is listed, the date must be sp f filing.)	of filing: (OPTIONAL) ecific and cannot be more than five business days prior to or 9
CV: Effective date, if other than the date ctive date is listed, the date must be sp	
CV: Effective date, if other than the date entire date is listed, the date must be sp filing.) EVI: Other provisions, if any. REQUIRED SIGNATURE:	ecific and cannot be more than five business days prior to or 9
CV: Effective date, if other than the date effive date is listed, the date must be sp. filing.) CVI: Other provisions, if any. Signature of a me (In accordance with section 60 constitutes an affirmation under 1 am aware that any false information.	ecific and cannot be more than five business days prior to or 9
V: Effective date, if other than the date effive date is listed, the date must be sp filing.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section 60 constitutes an affirmation under 1 am aware that any false information with section for the section for t	ember or an authorized representative of a member. 25.0203 (1) (b), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. The penalties of perjury that the facts stated herein are true. The penalties of perjury that the facts stated herein are true. The penalties of perjury that the facts stated herein are true. The penalties of perjury that the facts stated herein are true. The penalties of perjury that the facts stated herein are true. The penalties of perjury that the facts stated herein are true. The penalties of perjury that the facts stated herein are true. The penalties of perjury that the facts stated herein are true. The penalties of perjury that the facts stated herein are true. The penalties of perjury that the facts stated herein are true. The penalties of perjury that the facts stated herein are true. The penalties of perjury that the facts stated herein are true. The penalties of perjury that the facts stated herein are true. The penalties of pen
CV: Effective date, if other than the date effive date is listed, the date must be sp. filing.) CVI: Other provisions, if any. Signature of a me (In accordance with section 60 constitutes an affirmation under 1 am aware that any false infor constitutes a third degree felor	ember or an authorized representative of a member. 25.0203 (1) (b), Piorida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true. The remaining submitted in a document to the Department of State