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Norm D. Fugate

Board Certified Attorney

• Real Estate Law

• City, County and Local Government Law



Norm D. Fugate, P.A.

A Law Firm

Woodroe Blake Fugate

Associate Attorney

March 5, 2015

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

SUBJECT: F. BULLOCK, LLC

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Woodroe Blake Fugate
Norm D. Fugate, P.A.
Post Office Box 98
Williston, FL 32696

E-mail address (to be used for future annual report notification): blake@normdfugatepa.com

For further information concerning this matter, please call:

Woodroe Blake Fugate at (352) 528-0019

Enclosed is a check for the following amount: \$130.00 Filing Fee and Certificate of Status

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

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**ARTICLES OF ORGANIZATION
OF
F. BULLOCK, LLC**

ARTICLE I – NAME

The name of the limited liability company is F. BULLOCK, LLC, ("company").

ARTICLE II – ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:
639 NE 2nd Street
Williston, Florida 32696

Mailing Address:
639 NE 2nd Street
Williston, Florida 32696

**ARTICLE III - REGISTERED AGENT,
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE**

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

William Frank Bullock, Jr.
639 NE 2nd Street
Williston, Florida 32696

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.



William Frank Bullock, Jr.

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JACKSONVILLE, FLORIDA

ARTICLE IV - MANAGERS OR MEMBERS

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

MGR William Frank Bullock, Jr.
639 NE 2nd Street
Williston, Florida 32696

REQUIRED SIGNATURE:


Signature of a member or an authorized representative of a member.

(In accordance with section 605.205(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

William Frank Bullock, Jr., Trustee of the William
Frank Bullock, Jr. Revocable Living Trust
Typed or printed name of signee

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JACKSONVILLE, FLORIDA