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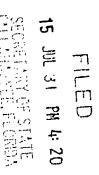
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

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### **COVER LETTER**

FILED

TO:

Registration Section
Division of Corporations

Kaylan Walden

15 JUL 31 PM 4: 20

SUBJECT: 4875 Lynn Drive, LLC

SECRETARY OF STATE TALEMHASSEE, FLORIDA

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:

		Name	of Person	
	Liberis Law Firm			
		Firm/	Company	
	212 West Intendencia Street			
		Ad	ldress	
	Pensacola, Florida 32502			
		City/State	and Zip Code	
	registeredagent@Liberislaw.co	om	•	
	E-mail address: (t	o be used for futur	e annual report notificat	ion)
For further	r information concerning this mat	ter, please call:		
	Kaylan Walden	850 at (	438-9647	
	Name of Person	Area Code	Daytime Telephor	ne Number
Enclosed	l is a check for the following amo	unt:		
]\$125.00	Filing Fee \$130.00 Filing Certificate of \$	Status L_Cert	5.00 Filing Fee & [ified Copy onal copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

### **Mailing Address**

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

# **Street Address**

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

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ABÎTICLE I - Name:	FILED	
The name of the Limited Liability Company is:	15 JUL 31 PH 4: 2	
4875 Lynn Drive, LLC	SEGRETARY OF STATE	
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")	The minute of the LOND of the Control of the Contro	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:		
Principal Office Address: Mailing Add	lress:	

958 Bucyrus Lane, Cantonment, FL 32533

0

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:

4875 Lynn Drive, Pensacola, FL 32571

Charles S. Liberis		
	Name	
212 West Intendend	cia Street	
Florida street addre	ess (P.O. Box <b>NOT</b> a	cceptable)
Pensacola	FL	32502
City	State	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)

Page 1 of 2

H	AMBR'' = Authorized M	Name and Address:
	MGR" = Manager	•
_!	MGR	Tammie Thompson Lowery
_	_	958 Bucyrus Lane
		Cantonment, FL 32533
1	AMBR	Sherry Elaine Land
_		4432 Werner Way
		Milton, FL 32583
1	AMBR	Edward Ray Thompson
_		4875 Lynn Drive
		Pace, FL 32571
_	<del></del>	
(1	Use attachment if necessa	
ARTICLE	V: Effective date, if other	n the date of filing: (OPTIONAL)
(If an effec	tive date is listed, the da	ust be specific and cannot be more than five business days prior to or 90 days after
the date of	filing.)	
		loes not meet the applicable statutory filing requirements, this date will not be listed as
the docum	ent's effective date on th	partment of State's records.
ARTICLE	VI: Other provisions, if	

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

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.

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.

Charles S. Liberis

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)

→ ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)

Page 2 of 2