L16000016440

(Re	questor's Name)	
(Add	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	,

Office Use Only



200280867812

01/15/16--01011--006 **160.00

16 JAN 15 PH 3: 57

mD 1/28

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Margaret Schermerhoru Dirt Hoor 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:				
Margaret A Schermentonn Name of Person				
Margaret Schennethorn Dirt 7100r Firm/Company				
8290 Segura St Address				
City/State and Zip Code Margydist & G. Mail. Com B-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Margaret at (850) 565-0030 Name of Person Area Code Daytime Telephone Number				
Enclosed is a check for the following amount: \$\int_{125.00}\$ \text{Filing Fee} \text{\$\int_{130.00}\$ \text{Filing Fee & Certified Copy (additional copy is enclosed)}} \text{\$\int_{155.00}\$ \text{Filing Fee & Certified Copy (additional copy is enclosed)}} \text{\$\int_{160.00}\$ \text{Filing Fee, Certified Copy (additional copy is enclosed)}}				
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301				

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	R	T	ŀ	C	L	E	ŀ	-	N٤	m	e:
---	---	---	---	---	---	---	---	---	----	---	----

The name of the Limited Liability Company is:

Margaret Schermertorn Must end with the words "Limited Liability Con	Dirt 700r LLC	_	
ARTICLE II - Address: The mailing address and street address of the principal office of the Li		16 JA	1 1
Principal Office Address:	Mailing Address:		
0240 DEQUEA ST. WAYAME, TI	Navaria 7	E SE	
ARTICLE III - Registered Agent, Registered Office, & Registered	d Agent's Signature:	57	

(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:

P.O. Box NOT acceptable)

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..

(CONTINUED)

egistered Agent's Signature (REQUIRED)

Page 1 of 2

The name and address of each person aut	horized to manage and control the Limited Liability Company:
Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Manager	Margaret A Schemenhorn
	NAVACE 71 32560
	
	S 41
	TO 30 1
(1)	
(Use attachment if necessary)	
	of filing: (OPTIONAL)
(If an effective date is listed, the date must be spe the date of filing.)	ecific and cannot be more than five business days prior to or 90 days after
Note: If the date inserted in this block does not m	neet the applicable statutory filing requirements, this date will not be listed as
the document's effective date on the Department of	of State's records.
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	Λ Λ
Ill arosa til	+
Signature of a me	mber or an authorized representative of a member.
This document is execut	ed in accordance with section 605.0203 (1) (b), Florida Statutes. Information submitted in a document to the Department of State
constitutes a third degree	e felony as provided for in s.817.155, F.S.
Warears	ELA Scheruszhorn
+ 121 Qa	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)
\$ 5.00 Certificate of Status (Optional)

ARTICLE IV-