116000039463

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

Office Use Only



600282224736

02/19/16--01023--010 **130.00

SECRETARY OF STATE

2016 FEB 19 FH 4: 3

COVER LETTER

	egistration Section vision of Corporations
CHD IF CT.	Palms Only, LLC
SUBJECT	Name of Limited Liability Company
The enclose	ed Articles of Organization and fee(s) are submitted for filing.
Please retur	n all correspondence concerning this matter to the following:
	Mr. Christy F. Harris, Esquire, Of Counsel
	Name of Person
	Kinsey, Vincent, Pyle, P.L.
	Firm/Company
	150 S. Palmetto Avenue, Suite 300
	Address
	Daytona Beach, FL 32114
ı	City/State and Zip Code xim.haddaway@kvplaw.com
-	E-mail address: (to be used for future annual report notification)
For further in	formation concerning this matter, please call:
	Mr. Christy F. Harris 386 252-1561
•	Name of Person Area Code Daytime Telephone Number
Enclosed is	a check for the following amount:
\$125.00 Fi	Sing Fee \$\ \times \text{S130.00 Filing Fee & Certificate of Status} \ \ \text{Certified Copy (additional copy is enclosed)} \ \ \ \text{Certified Copy (additional copy is enclosed)} \ \ \ \text{Certified Copy (additional copy is enclosed)} \ \ \ \ \text{Certified Copy (additional copy is enclosed)} \ \ \ \ \ \text{Certified Copy (additional copy is enclosed)} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	Mailing Address Street Address

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

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY **ARTICLE I - Name:** The name of the Limited Liability Company is: Palms Only, LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: 101 Carolyn Terrace 101 Carolyn Terrace Daytona Beach, FL 32118 Daytona Beach, FL 32118 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: William B. Linton Name 101 Carolyn Terrace Florida street address (P.O. Box NOT acceptable) FL 32118 Daytona Beach

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..

City

(CONTINUED)

State

Zip

Page 1 of 2

Registered Agent's Signature (REQUIRED)

<u>Citle:</u>	Name and Address:
'AMBR" = Authorized Member	
MGR" = Manager	
AMBR	William B. Linton
	101 Carolyn Terrace
	Daytona Beach, FL 32118
V: Effective date, if other than the tive date is listed, the date must be filing.)	date of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90
CV: Effective date, if other than the crive date is listed, the date must be filling.) the date inserted in this block does need a effective date on the Department's effective date on the Department.	e specific and cannot be more than five business days prior to or 90 of the state of the applicable statutory filing requirements, this date will not
ctive date is listed, the date must be filing.)	e specific and cannot be more than five business days prior to or 90 of the state of the applicable statutory filing requirements, this date will not
V: Effective date, if other than the extive date is listed, the date must be filing.) the date inserted in this block does nent's effective date on the Department's effective date.	e specific and cannot be more than five business days prior to or 90 of the state of the applicable statutory filing requirements, this date will not
V: Effective date, if other than the ctive date is listed, the date must be filing.) the date inserted in this block does nent's effective date on the Department's effective date. VI: Other provisions, if any.	e specific and cannot be more than five business days prior to or 90 of meet the applicable statutory filing requirements, this date will not ent of State's records.
V: Effective date, if other than the ctive date is listed, the date must be filing.) he date inserted in this block does nent's effective date on the Departm VI: Other provisions, if any. REOUIRED SIGNATURE Signature of a	e specific and cannot be more than five business days prior to or 90 of meet the applicable statutory filing requirements, this date will not ent of State's records. The specific and cannot be more than five business days prior to or 90 of the state of the applicable statutory filing requirements, this date will not ent of State's records. The specific and cannot be more than five business days prior to or 90 of the state of the
V: Effective date, if other than the effice date is listed, the date must be filing.) the date inserted in this block does nent's effective date on the Department's effective date. VI: Other provisions, if any. Signature of a This document is ex	e specific and cannot be more than five business days prior to or 90 of meet the applicable statutory filing requirements, this date will not ent of State's records. member or an authorized representative of a member. ecuted in accordance with section 605,0203 (1) (b). Florida Statutes.
V: Effective date, if other than the extive date is listed, the date must be filing.) the date inserted in this block does nent's effective date on the Departme. VI: Other provisions, if any. Signature of a This document is ex I am aware that any inserted in the content of	e specific and cannot be more than five business days prior to or 90 of meet the applicable statutory filing requirements, this date will not ent of State's records. The specific and cannot be more than five business days prior to or 90 of the state of the applicable statutory filing requirements, this date will not ent of State's records. The specific and cannot be more than five business days prior to or 90 of the state of the
EV: Effective date, if other than the ctive date is listed, the date must be filling.) the date inserted in this block does nent's effective date on the Departmet's effective d	member or an authorized representative of a member. ecuted in accordance with section 605.0203 (1) (b), Florida Statutes. alse information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.
V: Effective date, if other than the extive date is listed, the date must be filing.) the date inserted in this block does nent's effective date on the Departme. VI: Other provisions, if any. Signature of a This document is ex I am aware that any inserted in the content of	member or an authorized representative of a member. ecuted in accordance with section 605.0203 (1) (b), Florida Statutes. alse information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.
EV: Effective date, if other than the ctive date is listed, the date must be filling.) the date inserted in this block does nent's effective date on the Departmet's effective d	member or an authorized representative of a member. ecuted in accordance with section 605.0203 (1) (b), Florida Statutes. alse information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.

ARTICLE IV-