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## **COVER LETTER**

Division of Corporations
SUBJECT: MYRTLE GROVE LLC  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:
CATHERINE VANDER. Name of Person
MYRTLE GROVE LLC Firm/Company
761 N79TH AVENUE
PENSACOLA FL 32.506 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
VANDER  CATHERINE at (850) 501-9477  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status} \]  \$130.00 Filing Fee & \text{Certified Copy} \\ (additional copy is enclosed)  \$160.00 Filing Fee, \text{Certified Copy} \\ 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

ARTICLE I - N:
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The name of the Limited Liability Company is:

MYRTLE GROVE 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:

W. 79TH AVENUE

761 W. 79TH AVEN

PENSACOLA FL 32506 PENSACOLA, FL 32506

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:

CATHERINE VANDER

761 N.79TH AVENUE Florida street address (P.O. Box NOT acceptable)

DE12=1-010 S 39501

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	CATHERINE VANDER 761 N 797H AVENUE PENSACOLA, FL. 32506
	761 N 79TH AVENUE
	PENSACOLA FL 32506
	7210=K=001(,1270=00p
ffective date is listed, the date must be spe- e of filing.)	of filing: (OPTIONAL) cific and cannot be more than five business days prior to or 90 day
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**ARTICLE IV-**