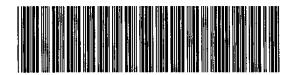
# L16000190781

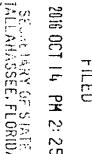
| (Re                     | equestor's Name)   | •           |
|-------------------------|--------------------|-------------|
| (Ad                     | dress)             |             |
| (Ad                     | ldress)            |             |
| (Cit                    | ty/State/Zip/Phone | 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



300291071633

10/14/16--01024--011 \*\*125.00



OCT 1 7 2016

# **COVER LETTER**

|                | egistration Section<br>vision of Corporations   |
|----------------|---|
| cub leor       | MERRYMAN RENTAL PROPERTIES LLC.   |
| SUBJECT        | Name of Limited Liability Company   |
| The enclose    | ed Articles of Organization and fee(s) are submitted for filing.  |
| Please retur   | rn all correspondence concerning this matter to the following:  |
|                | PATRICK MERRYMAN  |
|                | Name of Person  |
|                | Firm/Company  |
|                | 690 WOODBINE WAY APT 615  |
|                | Address   |
|                | RIVIERA BEACH/ FLORIDA 33418  |
| 1              | City/State and Zip Code PMERRYMAN7@GMAIL.COM  |
|                | E-mail address: (to be used for future annual report notification)  |
| For further in | nformation concerning this matter, please call:   |
|                | PATRICK MERRYMAN 772 618-0483   |
| •              | Name of Person Area Code Daytime Telephone Number   |
| Enclosed is    | a check for the following amount:   |
| \$125.00 Fi    | ling Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \ \text{Certified Copy (additional copy is enclosed)} \ \text{S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)} \ \text{Certified Copy (additional copy is enclosed)} \ Certified Copy (additional copy is enclose |
|                | Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building  |

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

FILED

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2016 OCT 14 PM 2: 25

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

SELICE IANY OF STATE
TALLAHASSEE, FLORIDA

### MERRYMAN RENTAL PROPERTIES 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: |
|-------------------------------|------------------|
| 690 WOODBINE WAY APT 615      | •                |
| RIVIERA BEACH / FLORIDA 33418 |                  |
|                               |                  |

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:

| PATRICK MERRYMA          | AN                  |         |
|--------------------------|---------------------|---------|
|                          | Name                |         |
| 690 WOODBINE WA          | Y APT 615           |         |
| Florida street address ( | P.O. Box NOT accept | otable) |
| RIVIERA BEACH            | FLORIDA             | 33418   |
| City                     | State               | 7in     |

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)

Page 1 of 2

red Agent's Signature (REQUIRED)

FILED

| <u>Title:</u> "AMBR" = Authorized   | Member  | Name and Address:   | TALLAHASSEE, FLO  |
|---|---|---|---|
| "MGR" = Manager   |   | D. TDIOU I CDDIU ( ) V  | •   |
| AMBR  |   | PATRICK MERRYMAN  | 15  |
|   |   | 690 WOODBINE WAY APT 6 RIVIERA BEACH / FLORIDA  |   |
|   |   | REVIEW BENCH TECHDA   | J3 110  |
|   |   |   |   |
|   |   |   |   |
|   |   |   | <u> </u>  |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |
| (Use attachment if neces  | ssary)  | <del>-,</del>   |   |
| •   | • .   | g:  | (OPTIONAL)  |
| CLE V: Effective date, if or effective date is listed, the  | ther than the date of filin   | g:  |   |
| CLE V: Effective date, if or effective date is listed, the te of filing.)   | ther than the date of filin<br>date must be specific a  | nd cannot be more than five busine  | ess days prior to or 90 days afte   |
| CLE V: Effective date, if or effective date is listed, the te of filing.)  If the date inserted in this   | ther than the date of filin<br>date must be specific a<br>block does not meet the   | nd cannot be more than five busing<br>e applicable statutory filing requirem          | ess days prior to or 90 days afte   |
| CLE V: Effective date, if or effective date is listed, the te of filing.)  If the date inserted in this ocument's effective date on                               | ther than the date of filin<br>date must be specific a<br>block does not meet the<br>the Department of State  | nd cannot be more than five busing<br>e applicable statutory filing requirem          | ess days prior to or 90 days afte   |
| CLE V: Effective date, if or effective date is listed, the te of filing.)   | ther than the date of filin<br>date must be specific a<br>block does not meet the<br>the Department of State  | nd cannot be more than five busing<br>e applicable statutory filing requirem          | ess days prior to or 90 days afte   |
| CLE V: Effective date, if or effective date is listed, the ite of filing.)  If the date inserted in this ocument's effective date on                              | ther than the date of filin<br>date must be specific a<br>block does not meet the<br>the Department of State  | nd cannot be more than five busing<br>e applicable statutory filing requirem          | ess days prior to or 90 days afte   |
| CLE V: Effective date, if or effective date is listed, the ite of filing.)  If the date inserted in this ocument's effective date on                              | ther than the date of filin<br>date must be specific a<br>block does not meet the<br>the Department of State  | nd cannot be more than five busing<br>e applicable statutory filing requirem          | ess days prior to or 90 days afte   |
| CLE V: Effective date, if or effective date is listed, the te of filing.)  If the date inserted in this ocument's effective date on                               | ther than the date of filin<br>date must be specific a<br>block does not meet the<br>the Department of State  | nd cannot be more than five busing<br>e applicable statutory filing requirem          | ess days prior to or 90 days afte   |
| CLE V: Effective date, if or effective date is listed, the te of filing.)  If the date inserted in this ocument's effective date on                               | ther than the date of filin date must be specific a block does not meet the the Department of State if any.   | nd cannot be more than five busing<br>e applicable statutory filing requirem          | ess days prior to or 90 days afte   |
| CLE V: Effective date, if of effective date is listed, the stee of filing.)  If the date inserted in this ocument's effective date on CLE VI: Other provisions, i | ther than the date of filin date must be specific a block does not meet the the Department of State if any.   | nd cannot be more than five busing<br>e applicable statutory filing requirem          | ess days prior to or 90 days afte   |
| CLE V: Effective date, if of effective date is listed, the te of filing.)  If the date inserted in this ocument's effective date on CLE VI: Other provisions, i   | ther than the date of filin date must be specific a block does not meet the the Department of State if any.   | nd cannot be more than five busined applicable statutory filing requirements records. | ess days prior to or 90 days after the sents, this date will not be listed                                  |
| CLE V: Effective date, if or effective date is listed, the ite of filing.)  If the date inserted in this ocument's effective date on                              | ther than the date of filin<br>date must be specific a<br>block does not meet the<br>the Department of State  | nd cannot be more than five busing<br>e applicable statutory filing requirem          | ess days prior to or 90 days a  |
| CLE V: Effective date, if of effective date is listed, the stee of filing.)  If the date inserted in this ocument's effective date on CLE VI: Other provisions, i | ther than the date of filin date must be specific a block does not meet the the Department of State if any.  URE:   | e applicable statutory filing requireme's records.                                    | ess days prior to or 90 days after the sents, this date will not be listed a member.                        |
| CLE V: Effective date, if of effective date is listed, the stee of filing.)  If the date inserted in this ocument's effective date on CLE VI: Other provisions, i | ther than the date of filin date must be specific a block does not meet the the Department of State if any.  URE:  ignature of a member cument is executed in a | nd cannot be more than five busing<br>e applicable statutory filing requirem          | ess days prior to or 90 days after the ents, this date will not be listed a member.  (b), Florida Statutes. |

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)