# L17000005782

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

. Office Use Only



800293084778

FILED

17 JAN 10 PH 3: 27

SECRE LARY OF STATE FALLAHASSEE, FLORIDA



### FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

1/10/17

NAME:

3M RE HOLDINGS, LLC

TYPE OF FILING: ARTICLES

COST:

160.00

RETURN: CERTIFIED COPY AND GOOD STANDING PLEASE

ACCOUNT: FCA00000015

**AUTHORIZATION:** 

ABBIE/PAUL HODGE

FILED

## ARTICLES OF ORGANIZATION JAN 10 PM 3: 28 OF

3M RE HOLDINGS, LLC TALL AHASSEE, FLORIDA
(a Florida limited liability company)

#### **ARTICLE I - NAME:**

The name of the limited liability company is 3M RE Holdings, LLC.

#### **ARTICLE II – ADDRESS:**

The principal office and mailing address of the limited liability company is 7876 Mount Ranier Drive, Jacksonville, Florida 32256.

#### ARTICLE III -REGISTERED AGENT:

The name and the Florida street address of the registered agent are:

Daniel Moffatt 7876 Mount Ranier Drive Jacksonville, Florida 32256

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.

Daniel Moffatt

AUTHORIZED REPRESENTATIVE:

Daniel Moffett