

L17000101550

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C. GOLDEN

MAY -9 2017

FLORIDA FILING & SEARCH SERVICES, INC.

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DATE: 5/5/17

NAME: FIONNMACS2 LLC, LLC

TYPE OF FILING: articles

COST: 160.00

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ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE



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Division of Corporations

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

May 8, 2017

FLORIDA FILING & SEARCH SERVICES, INC.

SUBJECT: FIONNMACS2, LLC
Ref. Number: W17000039279

We have received your document for FIONNMACS2, LLC and the authorization to debit your account in the amount of \$160.00. However, the document has not been filed and is being returned for the following:

The name of the entity must be identical throughout the document.

Double suffixes are not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 017A00009057

Please keep original file
date. Thanks!

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17 MAY -9 AM 11:42

**ARTICLES OF ORGANIZATION
OF
FIONNMACS2, LLC**
(a Florida limited liability company)

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2017 MAY -5 PM 2:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - NAME:

The name of the limited liability company is Fionnmacs2, LLC.

ARTICLE II - ADDRESS:

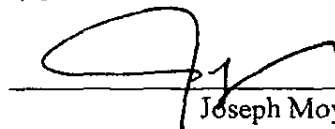
The principal office and mailing address of the limited liability company is 1262 Windsor Harbor Drive, Jacksonville, Florida 32225.

ARTICLE III -REGISTERED AGENT:

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

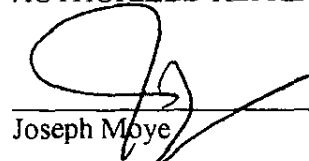
Joseph Moya
1262 Windsor Harbor Drive
Jacksonville, Florida 32225

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.



Joseph Moya

AUTHORIZED REPRESENTATIVE:



Joseph Moya