

L17000114473

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

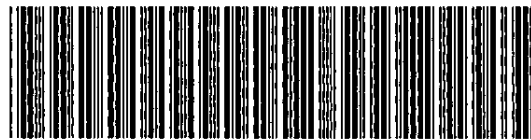
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700299404377

05/24/17--01017--009 **130.00

FILED
2017 MAY 24 PM 11:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CR

EDWARD BURNETT GAINES, LLC
ATTORNEY AT LAW

CIVIL & CRIMINAL
TRIAL PRACTICE
Licensed in Florida, Georgia
Washington D.C. & Iowa

1436 AVONDALE AVENUE
JACKSONVILLE, FLORIDA 32205
TELEPHONE (904) 388-4095
FACSIMILE 1-866-344-9187
EBG0462@gmail.com

May 23, 2017

VIA FedEx

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Drive
Tallahassee, Florida 32301

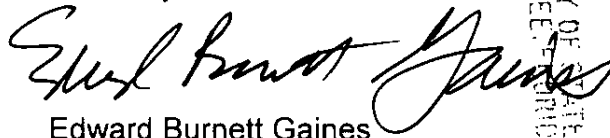
Re: Filing New Florida Limited Liability Company-
Properties of EBG, LLC

Dear Sir or Madam:

Please find enclosed duly signed Articles of Organization for this new Florida Limited Liability Company Properties of EBG, LLC, plus my check no 3576 totaling \$130.00 payable to the Florida Department of State for the \$125.00 filing fee plus a \$5.00 Certificate of Status of filing. Prior to filing, I checked with Sunbiz.org and there is no other Florida LLC in this name.

Please provide the Florida Certificate of Status after this has been filed to me.
Thank you.

Sincerely,



Edward Burnett Gaines

Enclosures: as stated

2017 MAY 24 PM 11:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: Properties of EBG, 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:

Edward Burnett Gaines

Name of Person

Edward Burnett Gaines, LLC

Firm/Company

1436 Avondale Ave.

Address

Jacksonville, Florida 32205

City/State and Zip Code

ebg0462@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Edward Burnett Gaines

(904)

874-1076

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐

\$125.00 Filing Fee

☒

\$130.00 Filing Fee &
Certificate of Status

☐

\$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐

\$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address

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

Street Address

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

2017 MAY 24 PM 11:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Properties of EBG, LLC

(Must contain 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:

1436 Avondale Ave.

Jacksonville, Florida 32205

Mailing Address:

1436 Avondale Ave .

Jacksonville, Florida 32205

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:

Edward Burnett Gaines

Name

1436 Avondale Ave.

Florida street address (P.O. Box **NOT** acceptable)

Jacksonville

Florida

32205

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.

Edward Burnett Gaines
Registered Agent's Signature (REQUIRED)

(CONTINUED)

2017 MAY 24 AM 11:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Edward Burnett Gaines

1436 Avondale Ave.

Jacksonville, Florida 32205

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



05/23/20

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Edward Burnett Gaines

Typed or printed name of signee

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)

2017 MAY 24 AM 11:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED