

L17000 11 P357

(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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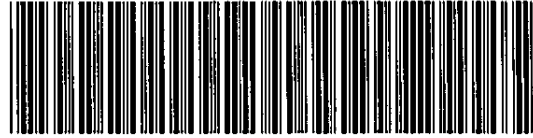
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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17 MAY 11 AM 9:03  
STATE OF TEXAS  
TALLAHASSEE, FLORIDA

*[Handwritten signature]*

5/12/17



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

17 MAY 31 PM 4:13

SPECIAL SERVICES  
REGISTRATION

May 12, 2017

CARILTO G. FLORES, E.A.  
C.G. FLORES & RAY G FLORES, CPA  
809 BEVERLY PARKWAY  
PENSACOLA, FL 32505

SUBJECT: 7861 GALAXI LLC  
Ref. Number: W17000040950

We have received your document for 7861 GALAXI LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date is not acceptable since it is not within five working days of the date of receipt.

Document received on 05/11/17.

Please return 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.

Neysa Culligan  
Regulatory Specialist II

Letter Number: 117A00009551

17 MAY 31 PM 10:48  
SPECIAL SERVICES  
REGISTRATION

COVER LETTER

TO: Registration Section  
Department of Corporations

SUBJECT: 7861 GALAXI LLC

The enclosed Articles of Organization and fee/fees are submitted for filing  
Please Return all correspondence concerning this matter to the following:

CARLITO G. FLORES, E.A.

\_\_\_\_\_  
Name of Person

C.G. FLORES & RAY G FLORES, CPA

\_\_\_\_\_  
Firm Company

809 BEVERLY PARKWAY

\_\_\_\_\_  
Address

PENSACOLA, FLORIDA 32505

\_\_\_\_\_  
City/State and Zip Code

FACTNG @ AOL.COM

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

For further information concerning this matter, please call  
CARLITO G. FLORES at (850) 435-6845

Enclosed is a check for the following amount  
**\$130.00** Filing Fee & Certificate of Status.

ARTICLES OF ORGANIZATION  
OF  
7861 GALAXI LLC

**ARTICLE I. - Name**

The name of the Limited Liability Company is:

7861 GALAXI LLC

**Article II - Address:**

The mailing address and principal office the Limited Liability Company is:

1601 Spalding Circle  
PENSACOLA, FLORIDA 32514

**ARTICLE III - Registered Agent Name and Address is:**

Terri Marshall  
1601 Spalding Circle  
PENSACOLA, FLORIDA 32514

*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.*

  
**Terri Marshall**

**ARTICLE IV -**

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

**Title**

**Name and Address:**

MGR- Manager/Director

Joseph L. Marshall  
1601 Spalding Circle  
Pensacola, Florida 32514

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PENSACOLA, FLORIDA

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MGR: Manager/Director

Terri Marshall  
1601 Spalding Circle  
Pensacola, Florida 32514

**ARTICLE V: Effective Date:**

Date of filing: ~~APRIL 1, 2017~~ *OR WITHIN FIVE WORKING DAYS*  
*4/11/17* *OF THE DATE OF RECEIPT.*

**ARTICLE VI: Other Provisions:**

To lawfully engage or transact in business permitted by law and Florida Statutes.

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 constitute a third felony as provided for in 817.155. F.S.

*Joseph L. Marshall* date *4/11/17*  
\_\_\_\_\_  
JOSEPH L. MARSHALL, MGR/DIRECTOR

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DEPT. OF STATE  
TALLAHASSEE, FLORIDA