

L17000136606

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

☐ MAIL

(Business Entity Name)

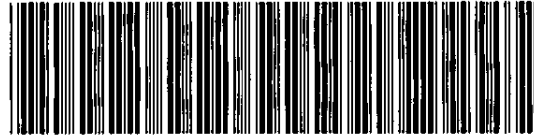
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**CORPORATE
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LLC

1. Fin Doctors Charities, LLC
(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

17 JUN 26 11:12:15
SEP 11 11:12:15

KLEIN & KLEIN, LLC

Attorneys at Law
40 Southeast 11th Avenue
Ocala, Florida 34471

HARVEY R. KLEIN (1922-2003)
H. RANDOLPH KLEIN
FRED N. ROBERTS, JR.
LAWRENCE C. CALLAWAY, III

PHONE (352) 732-7750
FAX (352) 732-7754

June 23, 2017

**TO: Registration Section
Division of Corporation**

RE: FIN DOCTORS CHARTERS, LLC

The attached Articles of Organization and fees are submitted for filing.

The following is the email address for the LLC:

greysonthomas@yahoo.com

For further information concerning this matter, please call

Joyce Henry at (352) 732-7750

17 JUN 25 PM 12:15
REC'D
CORP. DIV.
JUL 12 2017

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

17 JUN 26 AM 12:15
SEP 1 2015

ARTICLE I - Name:

The name of the Limited Liability Company is:

FIN DOCTORS CHARTERS, LLC

ARTICLE II - Address:

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

Principal Office Address:

15035 NE Highway 315
Ft. McCoy, FL 32134

Mailing Address:

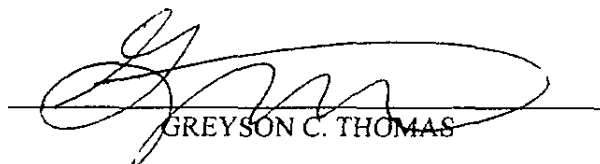
P. O. Box 479
Ft. McCoy, FL 32134

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

GREYSON C. THOMAS
15035 NE Highway 315
Ocala, FL 34471

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, Florida Statutes.


GREYSON C. THOMAS

ARTICLE IV- Manager(s) or Managing Member(s):

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

Title:

Name and Address:

"MGR"

Greyson C. Thomas
2427 SE 14th Street
Ocala, FL 34471

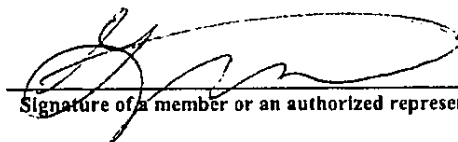
"MGR"

Jeromy Finegan
6304 Pecan Course
Ocala, FL 34472

ARTICLE V – Effective Date

The effective date of the Company shall be June 19, 2017

REQUIRED SIGNATURE:



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 in s.817.155, F.S.

GREYSON C. THOMAS

Typed or printed name of signer

17 JUN 26 11:12:15
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