# L11000144429

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	_
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



100300268671

07/05/17--01025--014 \*\*125.00

TATI AHASSEE FLORIDA

11 1/1/12



### CONNER • BOSCH LAW, P.A.

4488 North Oceanshore Boulevard Palm Coast, Florida 32137 Telephone (386) 445-9322 Facsimile (386) 446-4951

Timothy J. Conner tjconner@cblpa.com

William J. Bosch wbosch@cblpa.com

June 23, 2017

Registration Section Division of Corporation Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

> Re: Articles of Organization filing

Dear Sir/Madam:

Please find enclosed an original and duplicate copy of Articles of Organization for the following company for processing:

Team Guidry Holdings, LLC

Further enclosed is a check in the sum of \$125.00 payable to the "Florida Department of State" in payment of the filing fee.

Your prompt attention to this matter would be appreciated.

Sincerely,

SIGNED IN ATTIORNEYS' ABSENCE

Timothy J. Conner Attorney

TJC:rg

Enclosures

## ARTICLES OF ORGANIZATION OF TEAM GUIDRY HOLDINGS, LLC

17 JUL -5 AM DI 35
SECREVARY OF STATE
TALLAHASSEE FLORIDA

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 605, hereby make, acknowledge, and file the following Articles of Organization.

#### <u>ARTICLE I – NAME</u>

The name of the limited liability company shall be **TEAM GUIDRY HOLDINGS, LLC** ("company").

#### **ARTICLE II - ADDRESS**

The mailing address and the street address of the principal office of the company is 20 Armand Beach Drive, Palm Coast, Florida 32137.

#### <u>ARTICLE III – DURATION</u>

The company shall commence its existence on the date these Articles of Organization are filed by the Florida Department of State or on another effective date as specified. The company's existence shall be perpetual unless the company is dissolved earlier as provided in these Articles of Organization or in the Operating Agreement.

#### <u>ARTICLE IV – REGISTERED OFFICE AND AGENT</u>

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

TIMOTHY J. CONNER 4488 N. Oceanshore Blvd. Palm Coast, FL 32137

#### **ARTICLE V – MANAGERS**

The names and addresses of each person authorized to manage and control the limited liability company:

IDA SUE GUIDRY – Manager 20 Armand Beach Drive Palm Coast, FL 32137

#### **ARTICLE VI - ADMISSION OF NEW MEMBERS**

No members shall be admitted to the company except with unanimous written consent of the Members of the company. A member may not transfer his or her interest in the company except as set forth in the Operating Agreement of the company, and no transferee shall have the right to participate in the management of the business and affairs of the company unless the Transferee is approved for membership by a unanimous vote of the Members.

#### ARTICLE VII - MEMBERS' RIGHT TO CONTINUE BUSINESS

The company shall not be dissolved on the death, bankruptcy, or dissolution of a member, or on the occurrence of any other event that terminates the continued membership of a member in the company, unless the business of the company is terminated by majority vote of all the remaining members.

Timothy J. Conner, Organizer

STATE OF FLORIDA COUNTY OF FLAGLER

THE FOREGOING instrument was acknowledged before me this 33/d day of 4 year 4, 2017 by Timothy J. Conner, who is personally known to me or has produced 4 as identification and who did (did not ) take an oath.

NOTARY PUBLIC



#### ACCEPTANCE BY REGISTERED AGENT

Having been designated as Registered Agent to accept service of process for the above-stated limited liability company, at the registered office above, I hereby accept said designation, agree to act in this capacity, and agree to comply with the provisions of Section 48.091, Florida Statutes relative to keeping open said office.

> Timothy J. Conner Registered Agent

#### STATE OF FLORIDA **COUNTY OF FLAGLER**

The foregoing instru	ment was acknowle	edged before me this <u>23</u> day o	f
		, who is personally known to n	
and who has produced		as identification and wh	10
did/did not take an oath.			
Pai HT	, ,	HINNER GUZZA	

My Commission Expires: 07/30/2017