L1000243670

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone	(#)
(Business Entity Nam	<u> </u>
(Document Number)	
Certified Copies Certificates	of Status
Special Instructions to Filing Officer:	
Office Lise On	



11/28/17--01026--005 **125.00



<i>3</i>	
;	COVER LETTER
TO: New Filing Section Division of Corporation	ons I
Reidco LLC	l 1
	Name of Limited Liability Company
The enclosed Articles of Organ	zation and fee(s) are submitted for filing.
Please return all correspondenc	econcerning this matter to the following:
Debbie Mowbray	
	Name of Person
Dennis S. Rooker.	PC.
	Firm/Company
1421 Sachem Pl., S	ate. 3
	Address
Charlottesville, VA	22901
judy@biglick.com	City/State and Zip Code
E-mail	address: (to be used for future annual report notification)
For further information concerni	ng this matter, please call:
Debbie Mowbray	434 977-7424 at ()
Name of Pe	erson Area Code Daytime Telephone Number
Enclosed is a check for the follo	owing amount:
	0.00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee, tificate of Status (additional copy is enclosed) Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed)
<u>Mailing Add</u> New Filing S Division of C P.O. Box 63 Tallahassee,	ection New Filing Section Forporations Division of Corporations 77 Clifton Building

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

Reidco 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:

Mailing Address:

3890 SE 148th Terrace	3890 SE 148th Terrace
Morriston, FL 32668	Morriston, FL 32668

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

(The Limited Liability Company cannot scree 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 add	ress of the registere	ed agent are:			IT NO	***
ł	Reid Nagle			H H M	V 2	•••
-		Name		SS	8	ļ
1	3890 SE 148th Terr	ace		رر اند ص ربیا سو تبیا	AH	:
1	Florida street addre	ss (P.O. Box <u>NOT</u> ac	cceptable)		ڢ	•
<u>_N</u>	Morriston	FL	32668	10, TE	, (1)-	
	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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

• <u>Title:</u> "AMBR" = Authorized M	ember	Name and Address:		
"MGR" = Manager MGR		Reid Nagle 3890 SE 148th Terrace		
		Morriston, FL 32668		
			<u> </u>	
, <u> </u>				
(Use attachment if necessa	Ĩ			
(If an effective date is listed, the dat the date of filing.)	te must be specific and bock does not meet the ap e Department of State's	. (OPT cannot be more than five business days oplicable statutory filing requirements, thi records.	prior to or 90	•
·	<u> </u>			
REOUIRED SIGNATUR	RE	1/1/		
This docu I am award constitutes	ment is executed in according to the second se	an authorized representative of a memb ordance with section 605.0203 (1) (b), Flo ion submitted in a document to the Depart s provided for in s.817.155, F.S.	orida Statutes.	• • •.
<u>_Kc</u>	d Ñagle Typed o	or printed name of signee	V 28	· · ·
\$125.00 Filing Fee for / \$-30.00 Certified Copy \$-5.00 Certificate of S	Articles of Organizatio (Optional)	<u>'lling Fees:</u> n and Designation of Registered Agent	AN 9: 12 OF STATE FLORIDA	
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