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COVER LETTER

	w Filing Section vision of Corporations
SUBJECT:	COMMUNITY Wide Reply, LLC Name of Limited Liability Company
The enclose	d Articles of Organization and fee(s) are submitted for filing.
Please retur	n all correspondence concerning this matter to the following:
	Robinst C. Text Name of Person
	3301 Martin Hurst Pa
	Address
	THUAHASSEE FU. City/State and Zip Code
_	bteel 54 @ ACL, COM
	E-mail address: (to be used for future annual report notification)
For further in	nformation concerning this matter, please call:
	BOB Teel at (850) 545-6010
	Name of Person Area Code Daytime Telephone Number
Enclosed is	s a check for the following amount:
\$125.00 F	Status Silono Filing Fee & Certificate of Status (additional copy is enclosed) Status Silono 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Community Wide Realty 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:	
2709 K: VIARNEY WAY 2709 KILLARNOY WAY	
THUAHASSEL ZU 33312 TALLAHOSSER, FL. 325	³/2
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:	
ROBERT C. TEEL	
Florida street address (P.O. Box NOT acceptable)	
TALLAHAGGE FLA. 32312 City State Zip	
City State Zip	
laving been named as registered agent and to accept service of process for the above stated limited liability company at the lace designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I wither agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I may 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) AHASSEET	피
(CONTINUED) A AHASSEE TIGHT	FILED

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	Porant Tool 3201 Martin Hurst Re TALAHARSEL, FLA 323/2
(Use attachment if necessary)	
ate of filing.)	fic and cannot be more than five business days prior to or 90 days after at the applicable statutory filing requirements, this date will not be listed as
ocument's effective date on the Department of	State's records.
ocument's effective date on the Department of !	State's records.
Elif the date inserted in this block does not mee ocument's effective date on the Department of SICLE VI: Other provisions, if any. REQUIRED SIGNATURE:	State's records.
REQUIRED SIGNATURE: Signature of a mem This document is executed Lam aware that any false in	ber or an authorized representative of a member. If in accordance with section 605.0203 (1) (b), Florida Statutes, information submitted in a document to the Department of State telony as provided for in s.817.155, F.S.

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional) AHASSEE, FLORIN

to 9 + may Concerd &

I do not plan to Reinstate the dissolved Company - I want to use the Name on current application -

Robupt Tee L 10/8/14

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