

L18000236230

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

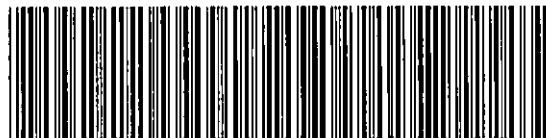
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OCT 15 2018

**CORPORATE
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- ☐ CERTIFIED COPY _____
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- ☒ FILING LLC _____

Cart Properties, LLC
(CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

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18 OCT -3 PM 12:37
TALLAHASSEE, FL
CLERK OF COURT

**ECIAL
STRUCTIONS:**

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

October 5, 2018

**TO: Registration Section
Division of Corporation**

RE: CART PROPERTIES, LLC

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

The following is the email address for the LLC:

lcartwrightdmd@aol.com

For further information concerning this matter, please call

Joyce Henry at (352) 732-7750

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JAL 10/10/18

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

18 OCT -8 PM 12:37
SUNSHINE
FALL 18

ARTICLE I - Name:

The name of the Limited Liability Company is:

CART PROPERTIES, LLC

ARTICLE II - Address:

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

Principal Office Address:

1615 SE 7th Street
Ocala, FL 34471

Mailing Address:

1615 SE 7th Street
Ocala, FL 34471

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

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

LAUREN CARTWRIGHT
1615 SE 7th Street
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.


LAUREN CARTWRIGHT

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:

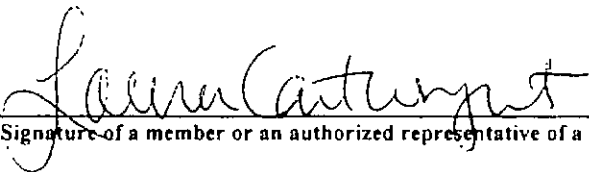
"MGR"

LAUREN CARTWRIGHT
1615 SE 7th Street
Ocala, FL 34471

"MGR"

BRIAN CARTWRIGHT
1615 SE 7th Street
Ocala, FL 34471

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.

LAUREN CARTWRIGHT

Typed or printed name of signee

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FLORIDA