

L18000 270267

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

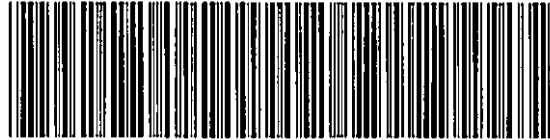
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: 2625 Palms, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Richard B. Reed, II
Name of Person
Firm/Company
3301 Bent Pine Drive
Address
Fort Pierce, FL 34951
City/State and Zip Code
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Richard B. Reed, II 772 240-3784
Name of Person at (Area Code) Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee ☒ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 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:

2625 Palms, 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:

3301 Bent Pine Drive

Fort Pierce , FL 34951

3301 Bent Pine Drive

Fort Pierce , FL 34951

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:

Richard B. Reed, II

Name

3301 Bent Pine Drive

Florida street address (P.O. Box **NOT** acceptable)

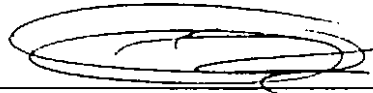
Fort Pierce , FL 34951

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-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Richard B. Reed, II
3301 Bent Pine Drive
Fort Pierce , FL 34951

(Use attachment if necessary)

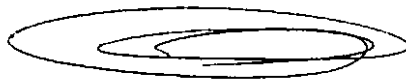
ARTICLE V: Effective date, if other than the date of filing: _____. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

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 for in s.817.155, F.S.

Richard B. Reed, II

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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LAW OFFICES
RICHARD D. SNEED, JR., P.A.
ESTABLISHED 1973

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2001 9TH AVENUE
VERO BEACH, FLORIDA 32960
(772) 562-2772 FAX (772) 562-9779

IN REPLY REFER TO

Vero Beach

November 16, 2018

Florida Department of State
Division of Corporations
Attn.: Corporate Filings
2661 W. Executive Center Circle
Clifton Building
Tallahassee, FL 32314
Via Federal Express

Re: 2625 Palms, LLC

Dear Sir or Madame:

Enclosed please the Articles of Organization for 2625 Palms, LLC, together with our firm's check in the amount of \$130.00, which represents the filing fee and fee for certificate of status.

Should you require anything further in this regard, please advise.

Thank you.

Very truly yours,

Law Offices of
Richard D. Sneed, Jr., P.A.



Richard D. Sneed, Jr., Esquire
RDS/ksf/enc.