L19000010814

(Requ	estor's Name)			
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Busir	ness Entity Nar	ne)		
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



000322098920

01/07/19--01021--003 **160.00



JAN 1 4 2019 K Brumbley

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Ideal Petro Properties L.L.C. Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filling.
Please return all correspondence concerning this matter to the following:
Ingrid Eskeland Name of Person
I deal Petro Properties Firm/Company
745 NW Waterlily Place Address
Jensen Beach. FL 34957 City/State and Zip Code I deal petroproperties Q. gmail.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee S130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of Corporations

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Lim	ited Liability Company is	-		
	Ideal	Petro	Properties	s L.L.C.
	(Must contain the words	"Limited Liab	ility Company, "L.L.C.," o	r "LLC.")
ARTICLE II - Add The mailing address		orincipal office	of the Limited Liability Co	ompany is:
	n			M - 111 A - H - B

Principal Office Address:	<u>Mailing Address</u> :	
745 NW Waterly Place Jensen Beuch, EL	745 NW Waterlily Place Jensen Bench, FL 34957	

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:

ARTICLE I - Name:

Ingrid Eskeland 745 NW Waterlily Place
Florida street address (P.O. Box NOT acceptable) Florida street address (P.O. DON THE 34967

Tensen Beach FL 34967

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..

(CONTINUED)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = ManagerM_G_R	Ingrid Esteland 748 NW waterly Place Jeasen Beach. FL 34957
(Use attachment if necessary)	
If an effective date is listed, the date must be some date of filing.)	te of filing:
RTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
Sha Sha	ril Tetuland
This document is exec I am aware that any fal	nember or an authorized representative of a member. cuted in accordance with section 605.0203 (1) (b), Florida Statutes. lse information submitted in a document to the Department of State ree felony as provided for in s.817.155, F.S.
In	Grid Eskeland Typed or printed name of signee

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

ARTICLE IV-

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