

L19000260510

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

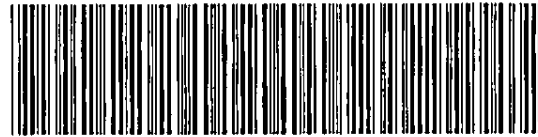
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100336256571

10/29/19--01009--007 **125.00

19 OCT 29 PM 11:00

2019 OCT 29 PM 12:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

OCT 30 2019

K Brumbley

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

955 LIVE OAK, LLC

Signature _____

Requested by: SETH

10/29/19

Name

Date

Time

Walk-In

Will Pick Up

____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
____ RA Resignation _____
____ Dissolution / Withdrawal _____
____ Annual Report / Reinstatement _____
____ Cert. Copy _____
____ Photo Copy _____
____ Certificate of Good Standing _____
____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____
____ Courier _____

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

**ARTICLE I
NAME**

The name of this Company shall be:

955 LIVE OAK, LLC

**ARTICLE II
ADDRESS**

The mailing address is P.O. BOX 1455, TARPON SPRINGS, FL 34688 and street address of the principal office of the Limited Liability Company is: 955 LIVE OAK STREET, TARPON SPRINGS, FLORIDA 34689.

**ARTICLE III
REGISTERED AGENT, REGISTERED OFFICE &
REGISTERED AGENT'S SIGNATURE**

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

O'CONNOR LAW FIRM
2240 BELLEAIR ROAD, SUITE 115
CLEARWATER, FLORIDA 33764

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.

O'CONNOR LAW FIRM
Registered Agent

By: _____

Patrick M. O'Connor, Esquire, for the Firm

FILED
2019 OCT 29 PM 12:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV
MANAGER(S) OR MANAGING MEMBER(S)

The name and address of each Manager or Managing Member is as follows:

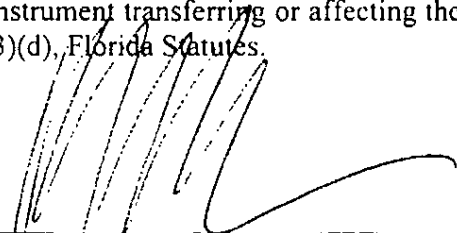
<u>Title:</u>	<u>Name and Address:</u>
MGR	WILLIAM J. MARLIN, JR. P.O. BOX 1455 TARPON SPRINGS, FL 34688
MGR	JULIE MARLIN P.O. BOX 1455 TARPON SPRINGS, FL 34688

ARTICLE V
MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager -managed company.

ARTICLE VI
REAL ESTATE TRANSACTIONS

The Manager or Member may sign and deliver an instrument transferring or affecting the LLC's interest in real estate, pursuant to section 605.0201(3)(d), Florida Statutes.



PATRICK M. O'CONNOR

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)