

L20000 69707

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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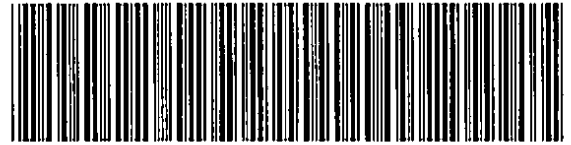
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2020 JAN -8 PM 12:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M. MOON

MAR 06 2020

Cover Letter

**TO: New LLC Filing
Division of Corporation
P.O. Box 6327
Tallahassee, Fl. 32314**

SUBJECT: 850 Doctor LLC – Is the name of the New LLC

The enclosed Articles of Organization and Fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:

Name: DO TRUST

By Mail: 7940 Front Beach Rd. Panama City Beach, Fl. 32407

Or By Email: Legal@DO-TRUST.com

Send future annual renewal notices to: Legal@DO-TRUST.com

Enclosed is Funds of \$160.00 as follows:

Filing Fee	\$100.00
Registered Agent Fee	\$25.00
Certified Copy	\$30.00
Certificate of Status	\$5.00
TOTAL	\$160.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**DO Trust - 7940 Front Beach Rd. Panama City Beach, Fl. 32407
Legal@DO-TRUST.com**

Articles of Organization of LLC

The undersigned hereby form and establish a Limited Liability Company pursuant to Chapter 608, Florida Statutes as follows:

Article I

The name of this Limited Liability Company is: **850 Doctor LLC**

Article II

The address of the Limited Liability Company is:

**7940 Front Beach Rd.
Panama City Beach, Fl. 32407**

Article III

The purpose for which this Limited Liability Company is organized is:
Any & All Lawful Business for Perpetuality

Article IV

Management of the Limited Liability Company is vested in a **Manager or Manager's**.

Article V

The name and address of the Manager of this Limited Liability Company at the time of formation is: **DO TRUST 7940 Front Beach Rd. Panama City Beach, Fl. 32407**

Article VI

Effective date will be the day of filing.

 AR
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.

 AR
Printed Name of Signee

DO Trust - 7940 Front Beach Rd. Panama City Beach, Fl. 32407
Legal@DO-TRUST.com

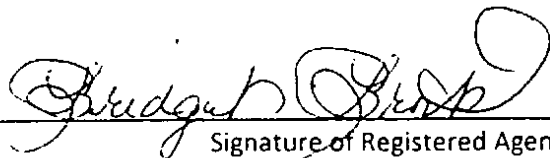
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TALLAHASSEE, FLORIDA

Article VII

The name and Florida street address of the Registered Agent for 850 Doctor LLC

Bridget Brock 7940 Front Beach Rd. Panama City Beach, Fl. 32407

Having been appointed as registered agent and do 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 furthermore agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties.


Signature of Registered Agent

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TALLAHASSEE, FLORIDA