2/25/2021



Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I2000000195 Phone : (850)521-0821 Fax Number : (850)558-1515

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

FLORIDA LIMITED LIABILITY CO. MARATHONERS I, LLC

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Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

J. FASON

MAR 0 1 2021

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	Filing Session of Co	ction erporations				
SUBJECT:	Marathon	ers I, LLC				
		N	une of Lir	nited Liabil	ity Company	
The enclosed	Articles o	f Organization an	d fce(s) ar	e submitted	for filing.	
Please return	all corresp	ondence concerni	ing this m	atter to the	following:	
S	amuel F. C	Colburn, Esq.				
				Name of	Person	
¥	/oods, We	idenmiller, Miche	etti & Rud	lnick, LLP		
_		1		Firm/Co	mpany	
90	045 Strada	Stell Court, Suite	e 400			
***			****	Addn	css	
N	aples, FL	34109				
	siat and Chi			ity/State am	d Zip Code	***************************************
		awfirmnaples.com		for future s	naual report notificat	ioni
For further infor		ncerning this mat			maarrepot: notifical	ion,
Sa	muel Colb	em	23 at (19	325-4070	
	Nam	e of Person		es Code	Daytime Telephon	e Number
Enclosed is a c	heck for ti	ne following anto-	unt:			
≣\$125.00 Fil	ing Fcc	□\$130.00 Filin Certificate of S		Certifie	.00 Filing Fee & d Copy (copy is enclosed)	□\$160.00 Fiting Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New Fi Divísio P.O. Bo	<u>e Address</u> ling Section n of Corporations ox 6327 ssee, FL 32314	;	7 7 2	Street Address New Filing Section Di The Centre of Tallaha 415 N. Monroe Stree Tallahassee, FL 32303	ssee x, Suite 810

3/004

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Glability Company is: Marathoners I, LLC	
(Must contain the words "Limited Liabili	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address; The mailing address and street address of the principal office o Principal Office Address;	f the Limited Liability Company is: Mailing Address:
11765 3rd Avenue Ocean Marathon, FL 33050	11765 3rd Avenue Ocean Marathon, FL 33050
ARTICLE III - Registered Agent, Registered Office, & Reg (The Limited Liability Company cannot serve as its own Regist another business entity with an active Florida registration.)	istered Agent's Signature: cred Agent. You must designate an individual or

WWMR Statutory Agent LLC Name 9045 Strada Stell Court, 4th Floor Florida street address (P.O. Box NOT acceptable) Naples FL 34105 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 oppointment 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)

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"AMBR" = Authorized Member "MGR" = Manager	Name and Address:	
MGR	Randy Acres 11765 3rd Avenue Ocean Marathon, Fl. 33050	• ·
MGR	Sandy Acres 11765 3rd Avenue Ocean Marathon, FL 33050	
(Use attachment if necessary)		
current's effective date on the Department	of State's records.	
CLE VI: Other provisions, if any. ad all lawful purpose.		
ud all lawful purpose.		
CLE VI: Other provisions, if any. ad all lawful purpose. REQUIRED SIGNATURE:	Randy Acres	********
REQUIRED SIGNATURE: Signature of a me This document is execut I am aware that any false	Oacustoned by:	
REQUIRED SIGNATURE: Signature of a me This document is execut I am aware that any false	Tandy litris Traceousticises There or an authorized representative of a member, led in accordance with section 605.0203 (1) (b), Florida Statutes, a information submitted in a document to the Department of State efelony as provided for in s.817.155, F.S.	
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REOURED SIGNATURE: Signature of a me This document is execut I am aware that any false constitutes a third degree Randy Acres	Pocusioned by: Fandy Lirus reconstructed. There or an authorized representative of a member: led in accordance with section 605.0203 (1) (b), Florida Statutes. Information submitted in a document to the Department of State felony as provided for in s.817.155, F.S. Typed or printed name of signee Filing Fees: ganization and Designation of Registered Agent	