L21000528181

(Re	questor's Name)	
(Ad	dress)	
(Adi	uress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #)	
PICK-UP	MAIT	MAIL
(Bu	siness Entity Name)	
(Do	cument Number)	<u> </u>
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

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	w Filing Section vision of Corpor	ations			
SHR IFCT:	Panama City M	obile Home Pari	k LLC		
Wind Co.	ranama City M	Name	of Limited Liab	ility Company	
The enclose	d Articles of Org	inization and fee	(s) are submitte	ed for filing.	
Please return	n all corresponde	nce concerning t	his matter to the	following:	
	Ronnie Bresemai	1			
			Name o	of Person	
			Firm/C	ompany	·
	7028 W Waters A	we #259			
		4.7	Ado	lress	***
	Tampa, Florida 3	3634			
•	1.5		-	nd Zip Code	
<u> </u>	orkingcapitaliny E-ma			annual report notificati	ion)
For further in	formation concer	ning this matter.	please call:		
i -	Ronnie Breseman		727 at (688-4658)	
	Name of	Person	Area Code	Daytime Telephon	e Number
Enclosed is	a check for the fo	llowing amount:			
= \$125.00 l		\$130.00 Filing I ertificate of Stat	us Certi	55.00 Filing Fee & fied Copy nal copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Ac			Street Address New Filing Section Di	ivision
Division of Corporations P.O. Box 6327			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDALIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability	y Company is:				
Panama City Mobile I	Home Park LLC				
(Must conta	in the words "Limited	Liability Compa	ny, "L.L.C.," or "ELC.")		
ARTICLE II - Address: The mailing address and street ad	dress of the principal	office of the Lim	ited Liability Company is:		
<u>Principa</u>	l Office Address:		Mailing Address:		
1412 W. Waters Ave #207 Tampa, Florida 33604			7028 W. Waters Ave #259 Tampa, Florida 33634		
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:					
	Ronald Breseman				
Name					
7028 W. Waters Ave. #259					
	Florida street address (P.O. Box NOT acceptable)				
	Tampa	FI	33634		
	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.,

Tyrold Breseman

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Meml	her
"MGR" = Manager	
AMBR	Ronald Breseman
	7028 W. Waters Ave #259
	Tampa, Florida 33634
AMBR	Evis Farmer
7.11.11.11	13650 Gulf Blvd #202
	Maderia Beach, Florida 33708
(Use attachment if necessary)	
ABSPREED BY TOO A TO A TO A TO	d to GCP IN A 17 2021 (ORTIONAL)
	nan the date of filing: <u>December 17, 2021</u> , (OPTIONAL) must be specific and cannot be more than five business days prior to or 90 days after
the date of filing.)	must be specific and cannot be more than five business days prior to or 50 days after
	does not meet the applicable statutory filing requirements, this date will not be listed as
the document's effective date on the D	** * * *
ARTICLE VI: Other provisions, if any,	
	p of the LLC and
Evis Farmer owns 50% of the LLC	
REQUIRED SIGNATURE:	
	
	are of a member or an authorized representative of a member. In is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
	at any false information submitted in a document to the Department of State
	third degree felony as provided for in s.817.155, F.S.
Ronald	l Breseman
	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)