5/14/22, 11:57 AM

221 fica Department of Stree 3 3 1 1 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.

(((H22000172895 3)))



H220001728953ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : THE PERMENTER LAW FIRM, P.A.

Account Number : I20200000193 Phone : (352)622-1811 Fax Number : (352)622-1866

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

Email Address: tommy@permenterlaw.com

FLORIDA LIMITED LIABILITY CO. Unit B 47 SW 17th Street, LLC

2 HAY 16 AH 7:59
TEPCRATIONS
TEPCRATIONS
TEPCRATIONS
TEPCRATIONS

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help





ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

UNIT B 47 SW 17TH STREET, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
---------------------------	------------------

2165 S.W. 80th Street 2165 S.W. 80th Street Ocala, Florida 34476 Ocala, Florida 34476

ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:

CYNTHIA L. TIECHE 2165 S.W. 80th Street Ocala, Florida 34476

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 statues 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)

H22000172895 3

ARTICLE IV — The name and address of each person au Company:	thorized to manage and control the Limited Liability
Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	STEVEN C. TIECHE 2165 S.W. 80 th Street Ocala, Florida 34476
MGR	CYNTHIA L. TIECHE 2165 S.W. 80 th Street Ocala, Florida 34476
prior to or 90 days after the date of filing.) Note: If the date inserted in this block doe this date will not be listed as the document ARTICLE VI: Other provisions, if any.	the date of filing:
	of the Limited Liability Company, or otherwise in the
	ne Limited Liability Company's Operating Agreement
This document is executed in acceptance of State constitutes a tipe. F.S.	athorized representative of a member. cordance with section 605.0203(1)(b), Florida se information submitted in a document to the hird-degree felony as provided for in s.817.155,
CYNTHIA L. TIECH	E

Typed or printed name of signee