

L27000294084

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



PICK-UP



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MAIL

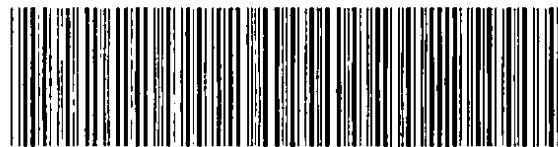
(Business Entity Name)

(Document Number)

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U.S. DEPARTMENT OF COMMERCE
INTERNATIONAL TRADE ADMINISTRATION
WASHINGTON, DC 20513

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U.S. DEPARTMENT OF COMMERCE
INTERNATIONAL TRADE ADMINISTRATION
WASHINGTON, DC 20513

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: Adams Retreat One, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Carolyn L. Adams

Name of Person

Firm/Company

2929 Lewiswood Lane

Address

Tallahassee, Florida 32305-1800

City/State and Zip Code

adams-retreats@centurylink.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sally Van Brunt 850 523-9300
Name of Person at () Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|---|--|---|
| ☐ \$125.00 Filing Fee | ☐ \$130.00 Filing Fee &
Certificate of Status | ☒ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | ☐ \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|---|--|---|

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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2022 JUL -1 AM 8:24
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

ARTICLES OF ORGANIZATION

OF

ADAMS RETREAT ONE, LLC

Article I. Name

The name of this limited liability company is **Adams Retreat One, LLC**, hereinafter also referred to as "the Company."

Article II. Address of Principal Office

The mailing address and street address of the principal office of the Company is 2929 Lewiswood Lane, Tallahassee, Florida 32305-1800.

Article III. Initial Registered Agent and Address

The name of the initial registered agent of the Company is Carolyn L. Adams, whose street address is 2929 Lewiswood Lane, Tallahassee, Florida 32305-1800.

Article IV. Management and Authorized Members

The Company will be managed by its members. The name and address of the persons authorized to manage and control the Company who are Authorized Members are:

Floyd E. Adams
2929 Lewiswood Lane
Tallahassee, Florida 32305-1800

Carolyn L. Adams
2929 Lewiswood Lane
Tallahassee, Florida 32305-1800

This document is executed in accordance with Section 605.0203(1)(b) of the Florida Statutes and Section 605.0205(3) of the Florida Statutes. I am aware that any false statement submitted in a document to the Department of State constitutes a third degree felony as provided for in Section 817.155 of the Florida Statutes.

Signed at Tallahassee, Leon County, Florida, on June 29, 2022.


Carolyn L. Adams, Authorized Member

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TALLAHASSEE, FLORIDA
DEPARTMENT OF STATE

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

Having been named as registered agent and to accept service of process for **Adams Retreat One, LLC**, a Florida limited liability company, at 2929 Lewiswood Lane, Tallahassee, Florida 32305-1800, 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 of the Florida Statutes.

This document is executed in accordance with Section 605.0203(1)(b) of the Florida Statutes and Section 605.0205(3) of the Florida Statutes. I am aware that any false statement submitted in a document to the Department of State constitutes a third degree felony as provided for in Section 817.155 of the Florida Statutes.

Signed at Tallahassee, Leon County, Florida, on June 29, 2022.


Carolyn L. Adams, Registered Agent

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CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA