

L23000187929

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

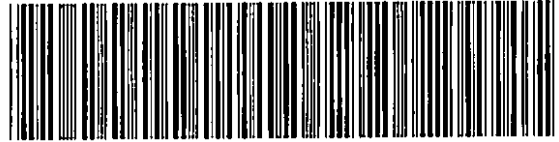
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300404963713

03/17/2023 11:00:00 AM

FILED

2023 MAR 27 PM 4:36

FILED

D. O'KEEFE

APR 17 2023

COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: St Johns Irrigation & Maintenance  
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:

Raymond S. Dow  
Name of Person

Firm/Company

1145 Hidenway Dr. N. St Johns FL 32259  
Address

St Johns, Florida 32259  
City/State and Zip Code

StJohnsIrrMaint@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Raymond Dow at ( 904 ) 466-1282  
Name of Person Area Code 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

**ARTICLE IV:**

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

Title: \_\_\_\_\_  
"AMBR" = Authorized Member  
"MGR" = Manager

**Name and Address:**

AMBR

Raymond S. Dow  
1145 Hideaway Dr. N.  
St. Johns, FL 32259

AMBR

Joshua C. Dow  
1145 Hideaway Dr. N.  
St. Johns, FL 32259

AMBR

Wesley R. Dow  
1145 Hideaway Dr. N.  
St. Johns, FL 32259

AMBR

Wanda F. Dow  
1145 Hideaway Dr. N.  
St. Johns, FL 32259

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 21 March 2023 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

Any changes made must be authorized by Raymond S. Dow

**REQUIRED SIGNATURE:**

Raymond S. Dow

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.

Raymond S. Dow

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)

2023 MAR 27 PM 4:38  
FILED  
MAR 27 2023  
ST. JOHNS COUNTY, FLORIDA  
CLERK OF CIRCUIT COURT

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

St Johns Irrigation & Maintenance LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

1145 Hideaway Dr N St Johns, FL  
32259

Mailing Address:

1145 Hideaway Dr N St Johns,  
FL 32259

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:

Raymond S Dow

Name

1145 Hideaway Dr. N.

Florida street address (P.O. Box **NOT** acceptable)

St. Johns, FL

City

State

32259

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.

Raymond S Dow

Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED AT ST. JOHNS

2023 MAR 27 PM 4:36