

L23000519160

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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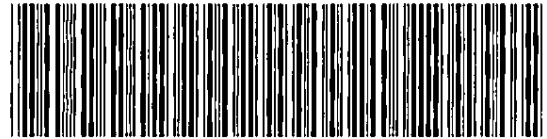
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2023 NOV -3 PM 4:43
CLERK OF ST.
HARRIS, FL

ROBERT WILLIAM LAWLER, JR.
907 N. WEST STREET
BUSHNELL, FL 33513

October 31, 2023

**New Filing Section
Division of Corporations**

SUBJECT: WILL LYNN, LLC

Dear Sir or Madam:

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Name of Person: Robert William Lawler, Jr.

Firm/Company: N/A

Address: 907 N. West Street
Bushnell, FL 33513

Email address: rlawlerbushnell@gmail.com

For further information concerning this matter, please call:

Robert Lawler at (352) 603-1277

Enclosed is a check for the following amount: \$155.00 Filing Fee & Certified Copy
(additional copy is enclosed)



Robert William Lawler, Jr.

/rwl

ARTICLES OF ORGANIZATION

FOR

WILL LYNN, LLC

A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the limited liability company (the "Company") is **WILL LYNN, LLC.**

ARTICLE II - Address

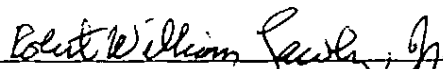
The mailing address and street address of the principal office of the Limited Liability Company is 907 N. West Street, Bushnell, Florida 33513.

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature

The name and the Florida street address of the registered agent are:

Robert William Lawler, Jr.
907N. West Street
Bushnell, Fl. 33513

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.


Registered Agent's Signature

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ARTICLE IV - Management

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

<u>Title:</u>	<u>Name and Address:</u>
MGR	Robert William Lawler, Jr. 907 N. West Street Bushnell, FL 33513
MGR	Robert William Lawler, III 1116 Winnemissett Ave. Deland, FL 32724

RECEIVED
TALLAHASSEE, FL

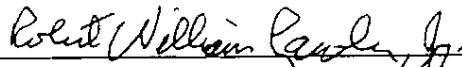
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ARTICLE V - Effective Date

The Articles of Organization shall be effective on the date of filing with the Division of Corporations.

SIGNATURE:



Robert William Lawler, Jr., as Manager

Typed or printed name of signee