L27000550453

(Descriptor's Nome)
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entry Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
operating detectors to timing officer.

Office Use Only



700419168527

2023 DEC 14 PH 2: 01

7.57

162.

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

12/14/2023

NAME: RYAN ASSOCIATES PROPERTY MANAGEMENT, LLC

TYPE OF FILING: ARTICLES

COST: -125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO: No	ew Filling Section Section of Corporation	on prations				
	RYAN & AS	SOCIATES PROI	ERTY I	MANAGE	NENT, LLC	_
SUBJECT	;			ed Liability		
The enclos	ed Articles of O	rganization and fe	e(s) ato s	submitted fo	or filing.	
		dence concerning				
	JACK G. WIL	LIAMS				
				Name of P	erson	
	WILLIAMS &	syfreit, pll	C			
				Firm/Con	epany	
	POST OFFIC	E BOX 2176				
				Addre	ss	
	ранама С	TY, FL 32402				
			Ci	ty/State and	Zip Code	
	MICKIE@WS	GFIRM.COM		C Calaine de	unual report notificatio	on)
	E	-mail address: (to	be used	fot withing a	man report domestic	,
For further	information cor	ocerning this matte	r, please	call:		
	JACK G. WII	LIAMS	nt (0	763-5368)	
	Nam	e of Person	Aı	ren Code	Daytime Telephone	; Number
Enclosed	is a check for the	ne following amou	nt:			
	30 Filing Fee	□\$130.00 Filin Certificate of S	g Fee &	Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Divisi	ng Address iling Section on of Corporation	5		Street Address New Filing Section D The Centre of Tullaha 2415 N. Monroe Stre	ASSCC

P.O. Box 6327 Tallahassee, PL 32314

2415 N. Monroe Street, Tallalussee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
RYAN & ASSOCIATES PROPERTY MANAGE (Must contain the words "Limited Liabi	EMENT, LLC lity 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:	Mailing Address:
8212 Thomas Drive	8212 Thomas Drive
Panama City Beach, FL 32408	Panama City Beach, FL 32408
JACK G. WILLIAMS No. 502 HARMON AVENUE	3
Florida street address (P.	•
PANAMA CITY, FL	32401
City	State Zip
Having been named as registered agent and to accept service of place designated in this cartificate, I hereby accept the appointm further agree to comply with the provisions of all statutes relative and familiar with and accept the obligations of my position as re	nent in registered agent and agree to deline and publies, and I

(CONTINUED)

Title: "AMBR" = Authorized Men "MGR" = Manager	Name and Address: mber
MGR	MELISSA K. RYAN 8212 THOMAS DRIVE PANAMA CITY BEACH. FL. 32408
(Use attachment if necessar	
LE V: Effective date, if other feetive date is listed, the date of filing.) If the date inserted in this blo	than the date of filing: (OPTIONAL) number the specific and cannot be more than five business days prior to or 90 ck does not meet the applicable statutory filing requirements, this date will not Department of State's records.
LE V: Effective date, if other frective date is listed, the date of filing.) If the date inserted in this blo ument's effective date on the	than the date of filing:
LE V: Effective date, if other feetive date is listed, the date of filing.) If the date inserted in this blo unsent's effective date on the LE VI: Other provisions, if ar REQUIRED SIGNATUR	than the date of filing:
LE V: Effective date, if other ffective date is listed, the date of filing.) If the date inserted in this blo unient's effective date on the LE VI: Other provisions, if an REQUIRED SIGNATUR Signature of the state of the stat	than the date of filing:
LE V: Effective date, if other feetive date is listed, the date of filing.) If the date inserted in this blo unient's effective date on the LE VI: Other provisions, if an REQUIRED SIGNATUR Signing This document is the second of the second	than the date of filing: