Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : TAX SAVERS
Account Number : T20150000107
Phone : (941)625-1925
Fax Number : (941)625-1526

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

Email Address: lyn.merritt2@gmail.com

FLORIDA LIMITED LIABILITY CO.
Princess Brandy Properties LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Help



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICIESOF	JAUAL 142	IIIQ. YFORFI	DADA LI	III ED LIABILITA COMI AC	•
ARTICLE I - Name: The name of the Limited Liability	Company	is:			
PRINCESS BRAND	Y PROP	ERTIES LL	<u>c</u>		
(Must contai	in the word	s "Limited L	iability Com	pany, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street add	dress of the	principal off	ice of the L	imited Liability Company is:	
<u>Principal</u>	Office Ac	ldress:		Mailing A	ddress:
14701 NW 100TH		RD	 	14701 NW 100TH AV	ENUE RD
REDDICK, FL 3268	<u> 86</u>			REDDICK, FL 32686	
ARTICLE III - Registered Agen (The Limited Liability Company of another business entity with an ac	annot serv	e as its own R	legistered A		individual or
The name and the Florida street ac	ddress of th	e registered a	igent are:		
	LINDA I	MERRITT			_
			Name		
	14701 N	W 100TH	AVENUE	RD	
				OT acceptable)	,
	REDDIQ	K	FL	32686	_
		City	State	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. Is 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..

Linda Menritt
Registered Agent's Signature (REQUIRE

(CONTINUED)

AMBR" = Manager AMBR LINDA MERRITT 14701 NW 100TH AVENUE RD REDDICK, FL 32686 Use attachment if necessary) V: Effective date, if other than the date of filing: 01/01/2024 (OPTIONAL) tive date is listed, the date must be specific and cannot be more than five business days prior to or 90	<u> Citle:</u>		Name and Address:
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\$ 5.00 Certificate of Status (Optional)