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Special Instructions to Filing Officer:		

Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations	
REAL ESTATE	
SUBJECT: Shady CAK LLC Name of Limited Liability Company	
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:	
ROBERT HUSTON Name of Person	
Name of Person	
Firm/Company	
2313 ASHLAND RD Address	
Address	
	ž
PANAMA City, FL 32405 City/State and Lip Code RBHUSTON 67 E GMAIL. COM	
City/State and Lip Code	5
PRHUSTALIGT & CMAIL COM	-
	*
Title .	Ali q: 2
For further information concerning this matter, please call:	Ò
	<u>.</u>
ROBERT HUSTON at 850 , 867-0147	
Name of Person Area Code Daytime Telephone Number	
And Cole Dayline receptore Author	
Enclosed is a check for the following amount:	
S125.00 Filing Fee S130.00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee.	
Certificate of Status Certified Copy Certificate of Status &	
(additional copy is enclosed) Certified Copy	
tadditional copy is encrosed	+

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 \$10
Tailahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED. LABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Shady OAK STATE

(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:

Mailing Address:

2313 ASHLAND DR PANAMA Cty, FL 32405

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:

Robert Huston
Name

2313 ASHLAND DR

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

PANAMA City, FL 32405
City State Zip

Having bee (named as registered age, twind to accept service of process for the above stated limited tiability 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 statute-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.,

Role & Blast

(CONTINUE))

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	ROBERT HUSTON 2313 ASHLAND DR PANAMA Gty, FL 32405
	2023 DEC - 1 AM 9: 1/2
the date of filing.)	of filing: / JANUARY 2024 (OPTIONAL) cific and cannot be more than five business days prior to or 90 days after neet the applicable statutory filing requirements, this date will not be listed as
ARTICLE VI: Other provisions, if any.	
Signature of a mer This document is execute I am aware that any false constitutes a third degree	mber or an authorized representative of a member, ed in accordance with section 605.0203 (1) (b). Florida Statutes, information submitted in a document to the Department of State felony as provided for in s.817.155. F.S. B. Hostow Typed or printed name of signee
KOOLAT	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 (2)

\$ 5.00 Certificate of Status (Optional)