

U400222970

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

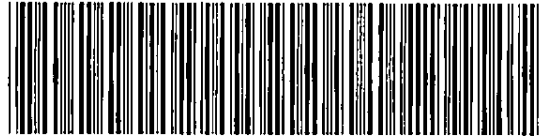
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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2024 MAY 20 AM 9:47

CLERK OF DISTRICT COURT
TALLAHASSEE, FL

RECEIVED

2024 MAY 20 PM 3:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2024 MAY 20 PM 3:22

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

PLEASE USE FUNDS FROM THIS ACCOUNT: I20210000160: \$ 125.00

AUTHORIZATION SIGNATURE: [Signature]

2501 Del Lago Drive, LLC

BUSINESS (Name)

Document #

- | | |
|---|---------------------------------------|
| <input type="checkbox"/> Walk in | <input type="checkbox"/> Pick up time |
| <input type="checkbox"/> Mail out | <input type="checkbox"/> Will wait |
| <input type="checkbox"/> Photocopy | |
| <input type="checkbox"/> Certified Copy | |
| <input type="checkbox"/> Certificate of Status | |

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☒ Limited Liability
- ☐ Domestication
- ☐ CORP
- ☐ LLLP

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name Cancel
- ☐ APOSTIL () Country

AMMENDMENTS

- ☐ Amendment
- ☐ Resignation of Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger
- ☐ Conversion

REGISTRATION/QUALIFICATIONS

- ☐ Foreign Filing
- ☐ Limited Partnership
- ☐ Dissolution/_Reinstatement
- ☐ Trademark
- ☐ Other

EXAMINER'S INITIALS: _____

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2024 MAY 10 PM 9:47
TALLAHASSEE, FLORIDA
CLERK OF CIRCUIT COURT

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2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

PLEASE USE FUNDS FROM THIS ACCOUNT: I20210000160: \$ _125.00 _____

AUTHORIZATION SIGNATURE: *[Signature]*

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BUSINESS (Name)

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TALLAHASSEE, FL
FACILITY

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: 2501 Del Lago Drive, LLC
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:

Richard G. Cole

Name of Person

Firm/Company

8253-J Backlick Road

Address

Lorton, VA 22079

City/State and Zip Code

jhurch@jjhpa.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

James Hurchalla 954 462-6776
Name of Person at 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

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TALLAHASSEE, FL
DIVISION OF STATE

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

2501 Del Lago Drive, 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:

8253-J Backlick Road
Lorton, VA 22079

Mailing Address:

8253-J Backlick Road
Lorton, VA 22079

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:

James J Hurchalla, Esquire

Name

1700 E Las Olas Blvd., Suite 206

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

Fort Lauderdale

FL

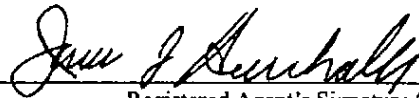
33301

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. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and 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 (REQUIRED)

(CONTINUED)

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SECRET

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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:

MGR

John D. Long
8253-J Backlick Road
Lorton, VA 22079

MGR

Richard G. Cole
8253-J Backlick Road
Lorton, VA 22079

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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.

REQUIRED SIGNATURE:



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.

James J. Hurchalla

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)

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CLERK OF THE COURT
JAMES J. HURCHALLA

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