(Requestor's Name) (Address)	000439612590
(Address)	000439612590
(City/State/Zip/Phone #)	سومی کر معرب از آر پیسر
(Business Entity Name)	
(Document Number)	
rtified Copies Certificates of Status	
pecial Instructions to Filing Officer:	
Office Use Only	



To: Department Of State, Division Of Corporations From: Amanda Miller Ext: x62969 Date: 12/17/24 Order #: 1727034-1 Re: PMC Properties 1076, LLC Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Certificate of Formation/Incorporation Amount to be deducted from our State Account: \$155.00 - FL State Account Number: 120000000195

Please take the following action: File in your office on basis Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

,

# COVER LETTER

TO:	New Filing Section
	Division of Corporations

PMC Properties 1076, LLC

SUBJECT: \_

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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:

Brian A. Cordero

Name of Person

)

Woods Weidenmiller Michetti & Rudnick, LLP

Firm/Company

9045 Strada Stell Court, 4th Floor

Address

Naples, FL 34109

City/State and Zip Code

bcordero@wwmrlaw.com

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

For further information concerning this matter, please call:

Brian A. Cor	dero 23 at (	39 )	325-4070	
Nam		rea Code	Daytime Telephon	e Number
Enclosed is a check for the	ne following amount:			
□\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified	00 Filing Fee & Copy copy is enclosed)	□\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
New F Divisio P.O. B	<u>g Address</u> iling Section on of Corporations ox 6327 assee, FL 32314	N T1 24	treet Address ew Filing Section Di he Centre of Tallaha 415 N. Monroe Stree allahassee, FL 3230	issee et. Suite 810

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

## PMC Properties 1076, 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:	Mailing Address:	
2005 Deerfield Circle, Naples, FL, 34109	2005 Deerfield Circle, Naples, FL, 34109	ī
		- ' ''''''''''''''''''''''''''''''''''
ARTICLE III - Registered Agent, Registered Office, & Regist (The Limited Liability Company cannot serve as its own Registere another business entity with an active Florida registration.)	ed Agent. You must designate an individual or	
The name and the Florida street address of the registered agent are	2:	
Patricia M. Carroll		

Name

2005 Deerfield Circ Florida street addre	le ss (P.O. Box <u>NOT</u> ac	rceptable)
Naples	FL.	34109
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 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 (REQUIRED)

(CONTINUED)

# ARTICLE IV-

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

iR	Patricia M. Carroll
<u> </u>	2005 Deerfield Circle, Naples, FL, 34109
	;
	· · · · ·

(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.)

<u>Note:</u> 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.

<u>MLVC</u>	IRED SIGNATURE;Signed by:
	Signature of a fifth for 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.
	Patricia M. Carroll
	Typed or printed name of signee
	Filing Fees:
\$125.	00 Filing Fee for Articles of Organization and Designation of Registered Agent
	00 Certified Copy (Optional)
S 5.	00 Certificate of Status (Optional)