

L99000002168

OFFICE USE ONLY (Document #)

Christy M. Pepper

(Requestor's Name)

4975 Lacrosse Rd. Ste. 300

(Address)

North Charleston, SC 29406

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

- ☐ Walk in ☐ Pick up time \_\_\_\_\_ ☐ Certified Copy
- ☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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-04/16/99-01003-002  
\*\*\*\*285.00 \*\*\*\*285.00

L99-2168

446

Name \_\_\_\_\_  
Availability \_\_\_\_\_  
Duration \_\_\_\_\_  
Expiration \_\_\_\_\_  
Updater \_\_\_\_\_  
Updater Verifier \_\_\_\_\_  
Acknowledgment \_\_\_\_\_  
W. P. Verifier \_\_\_\_\_

Examiner's Initials

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

**ARTICLE 1 – NAME:**

The name of the Limited Liability Company is: **Menke Realty Company, LLC**

**ARTICLE II – ADDRESS:**

The mailing address and street of the principal office of the Limited Liability Company is:

**2000 Webber Street  
Sarasota, FL 34239**

**ARTICLE III- DURATION:**

The period of duration for the Limited Liability Company shall be:

**Present until January 1, 2040**

**ARTICLE IV- MANAGEMENT:**

(Check and complete the appropriate statement)

☐ The limited liability company is to be managed by the manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

☒ The limited liability company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

**Linda Menke  
2000 Webber Street  
Sarasota, FL 34239**

**ARTICLE V – Admissions of Additional Members:**

The right, is given, of the members to admit additional members and the terms and conditions of the admissions shall be:

**ARTICLE VI – Members Right to Continue Business:**

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminated the continued membership of a member in the limited liability company shall be:

FILED  
99 APR 13 PM 5:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507 FLORIDA  
STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE  
FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED  
OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

**Menke Realty Company, LLC**

2. The name and address of the registered agent and office is:

**Linda Menke**

Name

**2000 Webber Street**

P.O. Box or Mail Drop **NOT** Acceptable

**Sarasota, FL**

**34239**

City/State/Zip

Having been named as registered agent and to accept service or 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.

*Linda Menke*  
Signature

4/1/99  
Date

FILED  
99 APR 13 PM 5:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of \_\_\_\_\_

Menke Realty Company, LLC Deposits and says:

- 1) the above named limited liability company has at least two members \_\_\_\_\_
- 2) the total amount of cash contributed by the member(s) is \$ 1,000.00
- 3) if any, the agreed value of a property other than cash  
contributed by the members is \$ ✓  
(A description of the property is attached and made a part hereto)
- 4) the amount of cash or property anticipated to be contributed  
by the members is \$ ✓
- 5) the total amount of 2,3, and 4 is \$ 1,000.00

Linda Menke  
Signature of a member or authorized representative of a member

(In accordance with section of 608.408(3) Florida Statutes, the execution of this affidavit constituted an affirmation under the penalties of perjury that the facts stated herein are true.)

FILED  
99 APR 13 PM 5:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA