

L99000007948

Brian Sealey
Requestor's Name
2380 19th St SW
Address
Naples FL 34107 941-348-3735
City/State/Zip Phone #

Office Use Only

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

1. Classic Cupboards
(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 checked="" 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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 NOV 19 AM 10:29

FILED

500003049805--5
-11/19/99-01036-018
****125.00 ****125.00

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

99 NOV 19 AM 10:22

RECEIVED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name:

The name of the limited liability Company is **Classic Cupboards L.L.C.**

ARTICLE II – Address:

The mailing address and street address of the principal office of the limited liability Company is:

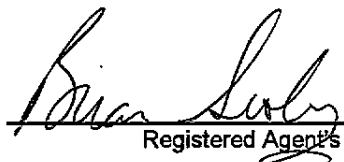
**4376 Corporate Square Suite 3
Naples, Florida 34117**

ARTICLE III – Registered Agent, Registered Office, & Registered Agents Signature:

The name and Florida street address of the registered agent is:

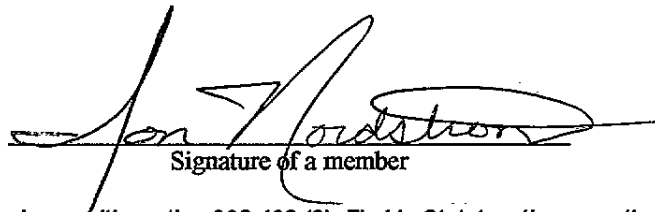
**Brian Scobey
2380 19th St. SW
Naples, FL 34117**

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 608, F.S.


Registered Agent's Signature

ARTICLE IV – Management:

The Limited Liability Company is to be managed by four managers and is therefore, a manager - managed company.


Signature of a member

*(In accordance with section 608.408 (3), Florida Statutes, the execution
Of this document constitutes as affirmation under the penalties of perjury
That the facts stated herein are true.)*

Jason Nordstrom

FILED
99 NOV 19 AM 10:29
SECRETARY OF STATE
TALLAHASSEE FLORIDA