L9900	20,009,238
Marguard Enterprises Requester's Name	s, uc
2341 Welliva Ridge &	
Apopka Pl 32712 Phone #	900030721097 -12/16/9901008006 ****155.00 ****155.00
W99-28881	Office Use Only
CORPORATION NAME(S) & DOCUM	MENT NUMBER(S), (if known):
1. 00789-0063	23-001071
(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	<u>AMENDMENTS</u>
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION = PROPERTY PROP
Annual Report Fictitious Name	☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other
CR2E031(7/97)	Examiner's Initials



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

December 17, 1999

MARQUARDT ENTERPRISES, LLC 2341 WEKIVA RIDGE RD. APOPKA, FL 32712

SUBJECT: MARQUARDT ENTERPRISES, LLC

Ref. Number: W99000028881

We have received your document for MARQUARDT ENTERPRISES, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6967.

Michelle Hodges Document Specialist

Letter Number: 399A00059383

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:		
MARQUARDT ENTERPRISES, LLC		
ARTICLE II - Address:		
The mailing address and street address of the principal office of the Limited Liability Co.	mpany	y is:
415-17 E MICHIGAN STREET		
ORLANDO, FL 32806		
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature	e:	
The name and the Florida street address of the registered agent are:		
DR GUSTAV MARQUARDT		
Name		
Name <u>H15-17 E MICHIGAN STREET</u> Florida street address (P.O. Box <u>NOT</u> acceptable)		
City, State, and Zip		
Having been named as registered agent and to accept service of process for the above stated	limited	d
liability company at the place designated in this certificate, I hereby accept the appointment a		
agent and agree to act in this capacity. I further agree to comply with the provisions of all sta		
relating to the proper and complete performance of my duties, and I am familiar with and acc		æ
obligations of my position as registered agent as provided for in Chapter 608, F,S		
antar A. Manguare 1500-		
Registered Agent's Signature		
Registered Agent's Signature		
Article IV - Management (Check box if applicable.)		
The Limited Liability Company is to be managed by one manager or more manager	s and	is.
therefore, a manager - managed company.		
(An additional article arrot be added if an affective date if a great to		
(An additional article must be added if an effective date is requested)	99	DIV.
Signature of a member or an authorized representative of a member.	OEC	SEC. 3
	. 0.	
(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury	27	
that the facts stated herein are true.)		
DR GUSTAV MARQUARDT	:01 IIV	~ ~~∵:
Typed or printed name of signee		
Dete - 27		(,)
<u>Filing Fees:</u> \$190.00 Filing Fee for Articles of Organization		

\$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)