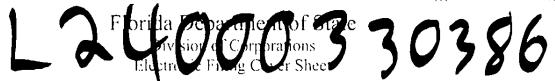
Fhx: 12393215034

To: Sumbiz etile account (LLC) Fax: (850) 617-6383

Page. 1 of 6 Division of Corporations

07/30/2024 6:30 AM

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : DORCEY LAW FIRM, PLC

Account Number : I20230000134 Phone : (239)418-0169

Fax Number : (239)418-0048

Enter the email address for this business entity to be used for future to be used for future to be used for future. annual report mailings. Enter only one email address please. **

Email	Add	ires	s :
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FLORIDA LIMITED LIABILITY CO.

344 Edgewater Way, LLC

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$130.00

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Help



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COVERLETTER

	New Filing Se Division of Co					
2000 11273		vater Way, LLC				
SUBJECT: Name			ne of Lin	ited Liabil	ity Company	
The encle	sed Articles of	Organization and	fee(s) are	submitted	for filing.	
Please ret	urn ali corresp	ondence concernir	ig this ma	tier to the	following:	
	Michael A.	Scott				
				Name of	Person	
	Dorcey Law	Firm, PLC				
				Firm Co		
	10181 Six N	dile Cypress Pkwy	Ste C			
				Addr	USS	
	Fort Myers,	F1, 33966				
		registeredagent.com		ty/State an	d Zip Code	
					annual report notificat	
for further		meerning this matt			·	
	Michael A. S	Scott			418 0169	
	Nan	ne of Person		ea Code	Daytime Telephon	e Number
_		the following amou				Eleka ka por
US125.€	00 Filing Fee	≘\$130.00 Filu Certificate of S		Certifi	5.00 Filing Fee & ed Copy at copy is enclosed)	☐\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed
		ng Address			Street Address	
		filing Section on of Corporation:	;		New Filing Section D The Centre of Tallah	
	P.O. I	3ox 6327			2415 N. Monroe Stre	
	Fallar	iassee, FL 32314			Tallahassee, FL 3230	1.5

Fax: 12393215034

To: Surbiz elile account (LLC) Fax: (850) 617-6383

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(((1240)0250073)))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Vay, L.L.C			
(Musi c	contain the words "Limited L	iability Company.	"L.L.C.," or "L.LC.")	
ARTICLE II - Address: The mailing address and stre	et address of the principal of	lice of the Limited	Liability Company is:	
<u>Prin</u>	cipal Office Address:		Mailing Address:	
243 Memory Ln. Unit 1			243 Memory Ln. Unit 1	
<u>Naples. FL 34113</u>	Naples, FL 34112		les. FL 34112	_
another business entity with The name and the Florida str	an active Florida registration eet address of the registered	agent are:	ou must designate an individual or	
another business entity with	an active Florida registration	agent are: a Service, LLC	n ou must designate an individual or	
another business entity with	an active Florida registration cet address of the registered $\frac{DLF Registered Agen}{}$	agent are: t Service, LLC Name	n ou must designate an individual or	
another business entity with	an active Florida registration eet address of the registered	agent are: st Service, LLC Name ss Pkwy Ste C		
another business entity with	an active Florida registration cet address of the registered DLF Registered Agen 10181 Six Mile Cypt	agent are: st Service, LLC Name ss Pkwy Ste C		
another business entity with	an active Florida registration cet address of the registered DLF Registered Agen 10181 Six Mile Cyptu Florida street address	agent are: at Service, LLC Name as Pkwy Ste C (P.O. Box <u>XOT</u> ac	cceptable)	

(CONTINUED)

ARTICLE IV-

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

Title: "AMBR" – Authorized Member	Name and Address:
"MGR" + Manager	
MGR	Thomas W. McConkey, III 243 Memory Ln. Unit 1, Naples, FL 34112
<u>MGR</u>	Cymhia L. McConkey 243 Memory Lu, Unit 1, Naples, FL 34112
(1) and a discount (Construction)	
(Use attachment if necessary)	
(If an effective date is listed, the date must be specthe date of filing.)	of filing:
ARTICLE VI: Other provisions, if any.	
ANTO LE VI. VIII provisions, il any.	
REQUIRED SIGNATURE:	
is Thomas W. McConkey, I	
This document is execute I am aware that any false i	nber or an authorized representative of a member, d in accordance with section 605.0203 (1) (b). Florida Statutes, information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.
Thomas W. McCo	nkey, 111
	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)
- S 5.00 Certificate of Status (Optional)