

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : PYLE, DELLINGER & NAYLOR, PLLC  
Account Number : I20000000053  
Phone : (386)615-9007  
Fax Number : (386)676-2615

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

Email Address: Chris@kardcpa.com

FLORIDA LIMITED LIABILITY CO.  
PLYMOUTH AVENUE PARTNERS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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ARTICLES OF ORGANIZATION  
OF  
PLYMOUTH AVENUE PARTNERS, LLC

ARTICLE I - NAME

The name of the limited liability company is PLYMOUTH AVENUE PARTNERS, LLC ("company").

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ARTICLE II - ADDRESS

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

Principal Office Address:  
120 S. Woodland Blvd., Ste. 206  
DeLand, Florida 32720

Mailing Address:  
120 S. Woodland Blvd., Ste. 206  
DeLand, Florida 32720

ARTICLE III - REGISTERED AGENT,  
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

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

CHRISTOPHER H. KARD  
120 S. Woodland Blvd., Ste. 206  
DeLand, Florida 32720

*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.*

  
CHRISTOPHER H. KARD

ARTICLE IV - MANAGERS OR MEMBERS

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

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Title:  
"MGR" = Manager  
"AMBR" = Authorized Member

Name and Address:

MGR

CHRISTOPHER H. KARD  
120 S. Woodland Blvd., Ste. 206  
DeLand, Florida 32720

**REQUIRED SIGNATURE:**



\_\_\_\_\_  
Signature of a member or 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.

CHRISTOPHER H. KARD

\_\_\_\_\_  
Typed or printed name of signer

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