

L120000063503

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

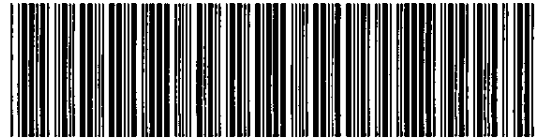
Special Instructions to Filing Officer:

A. LUNT

MAY 10 2011

EXAMINER

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2012 MAY -8 PM 8:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

05/08/12--01016--008 **125.00

Peter M Peer, II
5605 Woodduck Way
Midland, MI 48642

May 3, 2012

Florida Secretary of State
Division of Corporations
Corporate Filings
P. O. Box 6327
Tallahassee, FL 32314

Gentlemen:

Please find enclosed, Articles of Organization with designation of registered agent and Operating Agreement for Peer Daytona Property, LLC.

A check for the \$125.00 filing fee is also enclosed.

Sincerely,



Peter M. Peer, II

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

Peer Daytona Property, LLC

ARTICLE II - Address:

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

Principal Office Address:

5525 Colony Drive N
Saginaw, MI 48638

Mailing Address:

5525 Colony Drive N
Saginaw, MI 48638

Article III - Registered Agent, Registered Office, & Registered Agent's Signature:


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

Incorp Services, Inc.

17888 67th Court North
Loxahatchee, FL 33470
County: Palm Beach

Having been named as registered agent and to accept service of process for the above state limited liability company at the place designated on this certificate, I hereby accept the appointment as registered agent and agree to act in that 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 in Chapter 608 F.S.

Incorp Services, Inc.

By:  on behalf of
Registered Agent's Signature Incorp Services, Inc.

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SUNSHINE STATE
TALLAHASSEE, FL 07103

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ARTICLE IV - Manager:

The name and address of the manager is as follows:

<u>Title:</u>	<u>Name and Address:</u>
Manager	Robert J. Looby 5525 Colony Drive N Saginaw, MI 48638

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE V: Effective shall be as of the date of filing.

REQUIRED SIGNATURE:

Peter McKinley Peer, II, Beneficiary of Equity Trust Company, Custodian for the Individual Retirement Account f/b/o Peter McKinley Peer, II

By: 
Signature of member or authorized representative of member

(In accordance with Section 608.408(3), Florida Statutes, the execution of this document Constitutes an affirmation under penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Secretary of State Constitutes a third degree felony as provided for in s.817.155,F.S.

Peter McKinley Peer, II
Typed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation
Of registered agent.
\$30.00 Certified copy (Optional)
\$5.00 Certificate of Status (Optional)