

L14000015287

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H14000015508 3))



H140000155083ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : GRAY ROBINSON, P.A.
Account Number : 120000000092
Phone : (863) 284-2200
Fax Number : (863) 688-9771

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 JAN 28 AM 8:19

FILED

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

Email Address: michaelpeeples@mysouthernhome.com

REVISED

FLORIDA LIMITED LIABILITY CO.
LEGACY DEVELOPMENT, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

REVISED

RECEIVED

14 JAN 28 PM 1:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

01-28-2014 11:11AM FROM GRAY ROBINSON

888-688-9771

FILED
T-649 P.002/004 F-662
2014 JAN 28 AM 8:19

H14000015508 3

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION
OF
LEGACY DEVELOPMENT, LLC

The undersigned hereby presents these Articles of Organization for the formation of a Limited Liability Company pursuant to the Revised Florida Limited Liability Company Act.

ARTICLE I

NAME

The name of the Limited Liability Company is LEGACY DEVELOPMENT, LLC.

ARTICLE II

PRINCIPAL OFFICE

The mailing address of the principal office of the Limited Liability Company is 4479 Micanope Crescent Drive, Lakeland, Florida 33811.

ARTICLE III

DURATION

The Limited Liability Company shall have perpetual existence, commencing on the date of the filing of these Articles of Organization.

ARTICLE IV

PURPOSE

The Limited Liability Company is organized for the purpose of transacting any and all lawful business.

ARTICLE V

MANAGEMENT

The Limited Liability Company is to be manager-managed. The name and address of the

H1400001508 3

H14000015508 3

Initial Manager is:

MICHAEL PEEPLES
4479 Micanope Crescent Drive
Lakeland, Florida 33811

ARTICLE VI

INITIAL REGISTERED OFFICE AND INITIAL REGISTERED AGENT

The street address of the initial registered office of the Limited Liability Company is 4479 Micanope Crescent Drive, Lakeland, Florida 33811, and the name of the initial registered agent of the Limited Liability Company at that office is Michael Peeples.

ARTICLE VII

INDEMNIFICATION

Except to the extent otherwise provided in the Operating Agreement of the Limited Liability Company, the Limited Liability Company shall indemnify each person or entity who was or is a Member, director, officer, employee or agent of the Limited Liability Company to the full extent permitted by law.

IN WITNESS WHEREOF, the undersigned, being an authorized representative of the Initial Managers, has executed these Articles of Organization this 15th day of January, 2014.


MICHAEL PEEPLES

**CERTIFICATE OF DESIGNATION
OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 AND SECTION 605.0902 FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED AGENT/REGISTERED OFFICE IN THE STATE OF FLORIDA:

1. The name of the Limited Liability Company is LEGACY DEVELOPMENT,

H14000015508 3

H14000015508 3

LLC.

2. The name and street address of its initial Registered Agent and initial Registered Office are:

MICHAEL PEEPLES
4479 Micanope Crescent Drive
Lakeland, Florida 33811

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.


MICHAEL PEEPLES
Date: January 15th 2014

FILED
2014 JAN 28 AM 8:19
CLERK, DEPT. OF STATE
TALLAHASSEE, FLORIDA

H14000015508 3