

L14000095095

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

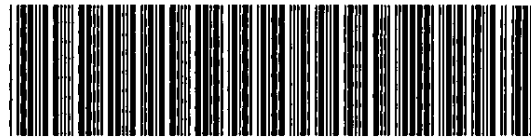
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600260883896

06/11/14--01017--008 **160.00

2014 JUN 11 AM 10:48
CLERK OF STATE
TALLAHASSEE, FLORIDA

FILED

JUN 13 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Orange Lake Athletic Community Club LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Thomas James Smith Jr.

Name of Person

Orange Lake Athletic Community Club LLC

Firm/Company

2221 SW 2nd St.

Address

Ocala, FL 34471

City/State and Zip Code

ASmithAprils@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Thomas Smith

Name of Person

at

(352)

Area Code

207-3004

Daytime Telephone Number

Enclosed is a check for the following amount:

\$125.00 Filing Fee

\$130.00 Filing Fee &
Certificate of Status

\$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

\$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 JUN 11 AM 10:48

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Orange Lake Athletic Community Club LLC.
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

2221 SW 2nd St
Ocala FL 34471

2221 SW 2nd St
Ocala FL 34471

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Thomas James Smith Jr.
Name

2221 SW 2nd St
Florida street address (P.O. Box NOT acceptable)

Ocala City FL 34471 Zip

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.

Thomas J. Smith Jr.
Registered Agent's Signature (REQUIRED)

(CONTINUED)

2014 JUN 11 AM 10:48
SECRETARY OF STATE
TALLAHASSEE FL 09102
FILED

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Thomas James Smith Jr.
2221 SW 2nd St
Deerfield FL 34471

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Thomas J. Smith Jr.

Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

Thomas James Smith Jr.

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)

\$ 5.00 Certificate of Status (Optional)

2014 JUN 11 AM 10:48
DEPARTMENT OF STATE
TALLAHASSEE FLORIDA

FILED