

L14000200004

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

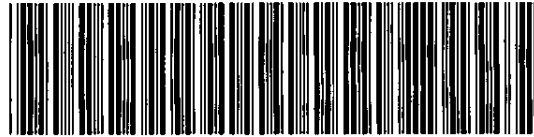
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

2555-



500291655405

500291655405
10/31/16--01001--006 **422.50

RECEIVED
16 OCT 28 PM 3:41
SOUTH CAROLINA
STATE ARCHIVES

FILED
16 OCT 28 AM 9:50

C. GOLDEN

NOV -2 2016

SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive
Tallahassee, Florida 32312

(850) 656-4724

SUNSHINECORPORATE2014@GMAIL.COM

Date: 10-28-16

ENTITY NAME:

Lake Mead Partners, LLC

****PLEASE FILE THE ATTACHED AND RETURN:****

X

Plain Copy

Certified Copy

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY:****

Document Number: _____

_____ Certified Copy of Arts & Amendments

_____ Certificate of Good Standing

****APOSTILLE/NOTARIAL CERTIFICATION:****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL AMOUNT OWED: 125.00

CHECK NUMBER: 3016

PLEASE CONTACT TINA AT 850-508-1891 FOR ANY PROBLEMS OR INFORMATION ON THIS MATTER.

Thank you!

Tina Goff, President

FILED
16 OCT 28 11:19:03



FLORIDA DEPARTMENT OF STATE
Division of Corporations

FILED

16 OCT 28 AM 10:59

October 31, 2016

SUNSHINE CORPORATE FILING OF FLORIDA INC.

SUBJECT: LAKE MEAD PARTNERS, LLC
Ref. Number: W16000073672

*Please resubmit
and honor the
initial fee
due*

We have received your document for LAKE MEAD PARTNERS, LLC and your check(s) totaling . However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent and street address must be consistent wherever it appears in your document.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 616A00023326

RECEIVED
DEPARTMENT OF STATE
16 Nov - 1 AM 11:51

FILED
16 OCT 28 AM 12:58

ARTICLES OF ORGANIZATION
OF
LAKE MEAD PARTNERS, LLC

The undersigned, acting pursuant to the Florida Revised Limited Liability Company Act and for the purpose of organizing a Florida limited liability company (the "Company"), hereby certified that:

1. The name of the Company is **Lake Mead Partners, LLC**
2. Street and Mailing Address. The street address and mailing address of the principle office of the Company is: **209 Ponte Vedra Park Drive, Ponte Vedra Beach, Florida 32082.**
3. Registered Agent. The name and street address of the initial registered agent of the Company is:

Ponte Vedra Plastic Surgery, P.A.
209 Ponte Vedra Park Drive
Ponte Vedra Beach, Florida 32082

4. Management. The Company is manager-managed. The name and address of the initial manager of the Company is:

Ponte Vedra Plastic Surgery, P.A.
209 Ponte Vedra Park Drive
Ponte Vedra Beach, Florida 32082

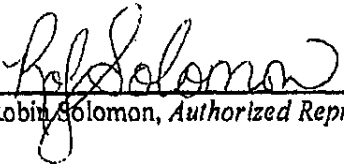
5. Members. The Company has or will have at least one member as of the time these Articles of Organization become effective.

6. Effective Date. These Articles of Organization shall become effective when filed.

7. Statement of Truth. I am aware that any false information submitted in a document to the Florida Department of State constitutes a third degree felony as provided for in §817.155, Florida Statutes.

[Remainder of page intentionally left blank, signature page follows]

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization in accordance with §605.0203(1)(b), Florida Statutes as of October 28th, 2016.


Robin Solomon, Authorized Representative

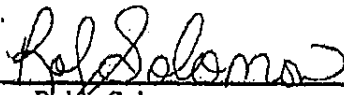
**ACCEPTANCE OF APPOINTMENT
AS REGISTERED AGENT**

The undersigned, who has been designated in the foregoing Articles of Organization as registered agent for the limited liability company therein named, hereby agrees that the undersigned (i) accepts such appointment as registered agent and will act in such capacity, (ii) will accept service of process for and on behalf of said limited liability company, (iii) will comply with the provisions of all statutes relating to the proper and complete performance of the duties of the undersigned, and (iv) is familiar with and accepts the obligations of the undersigned's position as registered agent as provided for in Chapter 605, Florida Statutes.

Dated: October 28, 2016

REGISTERED AGENT:

PONTE VEDRA PLASTIC SURGERY,
P.A.

By: 
Name: Robin Solomon
Title:

FILED
16 OCT 28 11:05 AM