

L000000000907

ATTORNEYS' TITLE

Requestor's Name

660 E. Jefferson St.

Address

Tallahassee, FL 32301

850-222-2785

City/St/Zip

Phone #

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1- THREE SISTERS SUBDIVISION, L.C.

2- _____

3- _____

4- _____

00 JAN 25 PM 3:41
DEPARTMENT OF STATE
TALLAHASSEE, FL 32301

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32301

00 JAN 25 PM 1:58

RECEIVED

Walk-in

Pick-up time ASAP

Certified Copy

Mail-out

Will wait

Photocopy

Certificate of Status

NEW FILINGS

<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS

<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS

<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION

<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

800003110248--8
-01/25/00--01067--015
****155.00 ****155.00

Examiner's Initials

Handwritten initials and date: 01-25-00

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I — Name:

The name of the Limited Liability Company is:

THREE SISTERS SUBDIVISION, L.C.

ARTICLE II — Address:

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

Mailing Address: **THREE SISTERS SUBDIVISION, L.C.**
c/o Jack O. Hackett II, Esquire
Farr, Farr, Emerich, Sifrit,
Hackett & Carr, P.A.
P.O. Drawer 511447
Punta Gorda, Florida 33951-1447

Street Address: **115 West Olympia Avenue**
Punta Gorda, Florida 33951-1447

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

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

Jack O. Hackett II, Esquire
Farr, Farr, Emerich, Sifrit,
Hackett and Carr, P.A.
115 West Olympia Avenue
Punta Gorda, Florida 33951-1447

00 JAN 25 PM 3:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 608, F.S.

Jack O. Hackett II - Registered Agent

Jack O. Hackett II
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Jack O. Hackett II
Typed or printed name of signee