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July 10, 2000

Secretary of State
Division of Corporations
409 E. Gaines Street
P.O. Box 6327
Tallahassee, Florida 32314

Re: Horse Venture, LLC

Dear Sir or Madam:

Enclosed please find two originals of the Articles of Organization for the above referenced corporation, together with our check in the sum of \$125.00 to cover the cost of filing. Please return the conformed copy to the letterhead address as shown above.

Very truly yours,

Debbie Boyce

Debbie Boyce, Secretary to
James S. Lupino

DB:db
Enclosures

FILED
00 AUG 18 PM 1:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

July 19, 2000

DEBBIE BOYCE
HERSHOFF LUPINO & MULICK LLP
90130 OLD MWY
TAVERNIER, FL 33070

SUBJECT: HORSE VENTURE, LLC
Ref. Number: W00000018093

We have received your document for HORSE VENTURE, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Effective October 1, 1999, Chapter 608, Florida Statutes, does not require or permit the filing of an "Affidavit of Membership and Capital Contributions." Therefore, the enclosed document has not been filed and is being returned to you.

Please return 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) 487-6043.

Shawn Logan
Document Specialist

Letter Number: 400A00039627

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: .

HORSE VENTURE, LLC

ARTICLE II - Address:

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

138 Sapodilla Drive
Islamorada, Florida 33036

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

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

Marcia Herish
Name
138 Sapodilla Drive
Florida street address (P.O. Box **NOT** acceptable)
Islamorada FL 33036
City, State, and 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 608, F.S..

Marcia Herish
Registered Agent's Signature
Marcia Herish

Article IV - Management (Check box if applicable.)

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

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

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

Marcia Herish
Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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