

L03000008201

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

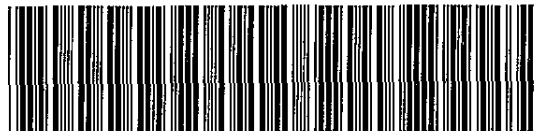
(Business Entity Name)

(Document Number)

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3/4

51

Capitol Services, Inc.

1045 Merritt Drive

Tallahassee, FL 32301

(850) 878-4734

Kathi or Brent

Office Use Only

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

1. Edgar T. Sconset Properties LLC  
(Corporation Name) (Document #) W03-6215
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☒ Walk in      ☒ Pick up time 3/4      ☒ Certified Copy
- ☐ Mail Out      ☐ Will wait      ☐ Photocopy      ☐ Certificate of Status

**NEW FILINGS**

- ☐ Profit  
☐ Not for Profit  
☒ Limited Liability  
☐ Domestication  
☐ Other

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**AMENDMENTS**

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

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Examiner's Initials



*Resubmit*

FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

March 4, 2003

*Please back date*

CAPITOL SERVICES, INC.

SUBJECT: EDGAR T. SCONSET PROPERTIES, LLC  
Ref. Number: W03000006215

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TALLAHASSEE, FLORIDA

We have received your document for EDGAR T. SCONSET PROPERTIES, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A limited liability company may not serve as its own registered agent. Please designate an individual or an active entity, with a Florida street address. A post office box is not acceptable.

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) 245-6958.

Lee Rivers  
Document Specialist

Letter Number: 203A00013675

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**ARTICLES OF ORGANIZATION  
FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I – Name:**

The name of the Limited Liability Company is: Edgar T. Sconset Properties LLC

**ARTICLE II – Address:**

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

Edgar T. Sconset Properties LLC  
424 S.W. 93<sup>rd</sup> Street  
Gainesville, FL 32607

**ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:**

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

Steven A. Bagen  
Name

424 S.W. 93<sup>rd</sup> Street

Florida street address (P.O. Box **NOT** acceptable)

Gainesville, Florida 32607

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.*

Steven A. Bagen  
Registered Agent's Signature

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

Steven A. Bagen (Member)  
(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.)

Steven A. Bagen

Typed or printed name of signee

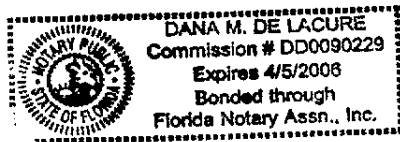
**Filing Fees:**

- \$ 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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03 MAR 14 PM 3:52

STATE OF FLORIDA )  
 ) SS.:  
COUNTY OF ALACHUA )

On this 24<sup>th</sup> day of February 2003, before me, the undersigned, personally appeared STEVEN A. BAGEN, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he executed the same in his capacities, and that by his signatures on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.



Dana M. De Lacure  
Notary Public

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