

L03000018558

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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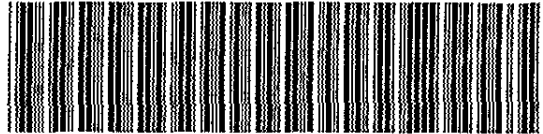
(Business Entity Name)

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TALLAHASSEE, FLORIDA

BK

Robert A. Pierce/Donna Marie Walters
Ausley & McMullen

Requestor's Name

227 S. Calhoun Street

Address

Tallahassee, FL 32301

City/State/Zip

425-5457

Phone #

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

1. Peake Management Group, LLC NEW
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in ☐ Pickup time ☒ **Certified Copy**
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	NEW FILINGS
	Profit
	NonProfit
<input checked="" type="checkbox"/>	Limited Liability
	Domestication
	Other

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

	OTHER FILINGS
	Annual Report
	Fictitious Name
	Name Reservation

	REGISTRATION/ QUALIFICATION
	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

Examiner's Initials

AUSLEY & McMULLEN

ATTORNEYS AND COUNSELORS AT LAW

227 SOUTH CALHOUN STREET
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TALLAHASSEE, FLORIDA 32301
(850) 224-9115 FAX (850) 222-7560
Writer's Direct Line: (850) 425-5457

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

May 21, 2003

Secretary of State
409 East Gaines Street
Tallahassee, Florida 32301

VIA HAND DELIVERY

Re: Peake Management Group, LLC

Dear Madam/Sir:

Enclosed are an original and one copy of the Articles of Organization for Peake Management Group, LLC, a limited liability company. These Articles include Registered Agent and Registered Office designation for this company.

This firm's check in the amount of \$155.00 is enclosed, comprised of the \$100.00 filing fee, \$25.00 Designation of Registered Agent fee, and \$30.00 certified copy fee.

Please do not hesitate to call me at (850) 425-5457 if you have any questions. We will have our messenger return to pick up the certified copy and the certificate of filing.

Thank you in advance for your usual assistance in these matters.

Sincerely,



Donna Marie Walters,
Legal Assistant

/dmw

Enclosures

RAP\PEAKE MGT\SOS ltr PMG 05.21.03
017468.30457

**ARTICLES OF ORGANIZATION
OF
PEAKE MANAGEMENT GROUP, LLC**

The undersigned, pursuant to the provisions of Chapter 608, Florida Statutes, provides the following information for the purpose of forming a Limited Liability Company under the laws of the State of Florida.

**ARTICLE 1.
Name**

The name of the Limited Liability Company is **Peake Management Group, LLC.**

**ARTICLE 2.
Address**

The street and mailing address of the place of business in Florida is:

3065 Cherokee Road
Saint Cloud, Florida 34772-7451

**ARTICLE 3.
Registered Agent and Registered Office**

The name and Florida street address of the initial registered agent in Florida for the Limited Liability Company are:

Robert A. Pierce
227 South Calhoun Street
Tallahassee, Florida 32301

Having been named as registered agent and as the person to accept service of process for the above-stated limited liability company at the place designated in these Articles, 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, Florida Statutes.



Robert A. Pierce, Registered Agent

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TALLAHASSEE, FLORIDA

**ARTICLE 4.
Management**

The Limited Liability Company shall be managed by its members and is, therefore, a member-managed company.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 16th day of May, 2003.

IN ACCORDANCE WITH SECTION 608.408(3), FLORIDA STATUTES, THE EXECUTION OF THIS DOCUMENT CONSTITUTES AN AFFIRMATION UNDER PENALTIES OF PERJURY THAT THE FACTS STATED HEREIN ARE TRUE.


WESLEY PEAKE, Member

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CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA