

# L03000022253

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(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

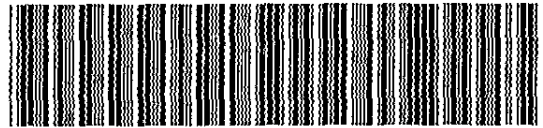
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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**FILED**  
03 JUN 16 AM 10:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

7867 Falling Leaf Pl  
Melbourne, FL 32940

June 11, 2003

Registration Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314  
(850) 245-6051

Dear Sir or Madam:

Below is the necessary information for filing for a Florida Limited Liability Company pursuant to Chapter 608.

**Applicant Name:** Akarin Ross Weatherford

**Limited Liability Company Name:** Santa's Ranch LLC

**Address:** 7867 Falling Leaf Pl  
Melbourne, FL 32940

**Daytime Phone:** (321) 917-2283

Item	Fee
Filing Fee for Articles of Organization	\$100.00
Designation of Registered Agent	\$25.00
Certified Copy	\$30.00
Certificate of Status	\$5.00
<b>Total:</b>	<b>\$160.00</b>

Sincerely,



Akarin Ross Weatherford

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TALLAHASSEE, FLORIDA

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

Santa's Ranch LLC

### ARTICLE II - Address:

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

7867 Falling Leaf Pl

Melbourne, FL 32940

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

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

Jack A. Weatherford

Name

207 Buck Drive NE

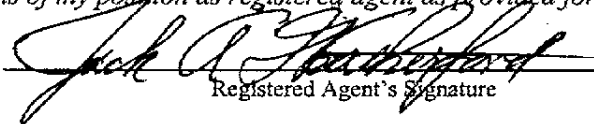
Florida street address (P.O. Box **NOT** acceptable)

Fort Walton Beach FL 32548

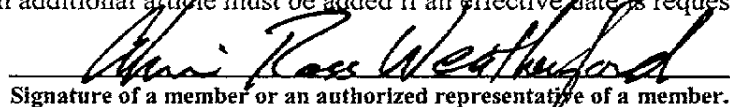
City, State, and Zip

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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.*

  
Registered Agent's Signature

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

  
Signature of a member or an authorized representative of a 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.)

Akarin Ross Weatherford

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)