

L03000030737

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

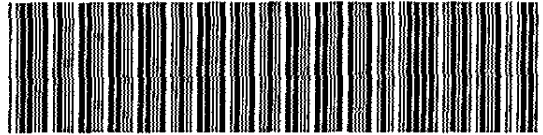
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SECURITY
TALLAHASSEE, FLORIDA

03 AUG 18 PM 3:20

FILED

VICTORIA R FRISK

July 1, 2003

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

FILED
03 AUG 18 PM 3:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Gentlemen:

My husband and I are retiring to the Villages in Florida. I am desirous of starting an LLC and have enclosed the proper forms that I got online.

Please be advised that we are not moving until August 7, 2003 and therefore I do not desire this to become effective, until August 15th.

Enclosed please find my check in the amount of \$130.00. This includes the \$100 filing fee, the \$25.00 for designated agent and a \$5.00 certificate of status.

Thank you for your attention.

Sincerely,


Victoria R. Frisk

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: STORIES FROM THE GARDEN, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Victoria R. Frisk
(Name of Person)

Stories from the Garden, LLC
(Firm/Company)

16730 SE 78th Lillywood Court
(Address)

The Villages, Florida 32159 32162
(City/State and Zip Code)

For further information concerning this matter, please call:

_____ at (_____) _____
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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03 AUG 18 PM 3:20
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

STORIES FROM THE GARDEN, LLC

ARTICLE II - Address:

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

Principal Office Address:

16730 SE 78th Lillywood Court
The Villages, Florida 32159 32162

Mailing Address:

16730 SE 78th Lillywood Court
The Villages, Florida 32159 32162

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

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

~~16730 SE 78th Lillywood Court~~ Victoria R. Frisk TFF
Name
16730 SE 78th Lillywood Court TFF
Florida street address (P.O. Box NOT acceptable)
The Villages, FL 32159 32162
City, State, and Zip

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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..


Registered Agent's Signature

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Victoria R. Frisk

16730 SE 78th Lillywood Court

The Villages, Florida 32159 32162

SECRETARY
TALLAHASSEE, FLORIDA

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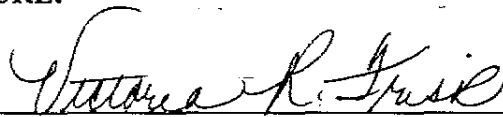
FILED

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

ARTICLE V-The effective date of this LLC will be August 15, 2003.

REQUIRED SIGNATURE:



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.)

Victoria R. Frisk

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)