

L03000041525

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

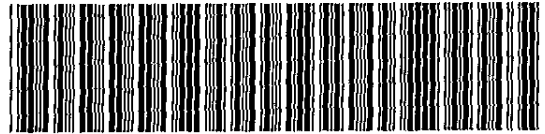
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900023894859

FILED

03 OCT 28 AM 8 07

TALLAHASSEE, FLORIDA

RECEIVED

03 OCT 28 PM 4:31

DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

[Handwritten signature]

ACCOUNT NO. : 072100000032

REFERENCE : 298281 9666A

AUTHORIZATION :

Patricia Pigato

COST LIMIT : \$ 125.00

FILED
03 OCT 28 AM 8:07
TALLAHASSEE, FLORIDA

ORDER DATE : October 28, 2003

ORDER TIME : 2:34 PM

ORDER NO. : 298281-005

CUSTOMER NO: 9666A

CUSTOMER: Jennifer Volkmar, Legal Asst
Gray, Ackerman & Haines, P.a.

Suite 1
125 Ne First Avenue
Ocala, FL 34470-6675

DOMESTIC FILING

NAME: SLADE PROPERTIES, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea - EXT. 1114

EXAMINER'S INITIALS: _____

**ARTICLES OF ORGANIZATION
FOR
SLADE PROPERTIES, LLC,
A FLORIDA LIMITED LIABILITY COMPANY**

FILED
03 OCT 28 AM 8:07
SE
TALLAHASSEE, FLORIDA

**ARTICLE 1.
NAME**

The name of the Limited Liability Company is "*Slade Properties, LLC*" (the "*Company*").

**ARTICLE 2.
ADDRESS**

The mailing address and street address of the principal office of the Company is 1015 SE Fort King Street, Ocala, FL 34481.

**ARTICLE 3.
DURATION**

The period of duration for the Company shall be perpetual unless the Company is earlier dissolved in accordance with either the provisions of the *Florida Limited Liability Company Act*, Sections 608.401 through 608.514 of the *Florida Statutes Annotated* (the "*Act*") or the Company's Operating Agreement among the members (the "*Operating Agreement*").

**ARTICLE 4.
MANAGEMENT**

The Limited Liability Company is to be managed by a manager or managers and the names and addresses of such manager who is to serve as manager is:

John Anastasia
3 NE Sanchez Avenue
Ocala, FL 34470

**ARTICLE 5.
PURPOSE**

The purpose for which the Company is being organized is to acquire, develop, own, lease, and/or resell real property, and to transact any other lawful business approved by the

**ARTICLES OF ORGANIZATION
FOR
SLADE PROPERTIES, LLC**

Page 2 of 3

members of the Company and for which a limited liability company may be formed under the laws of the State of Florida.

**ARTICLE 6.
MEMBERS' RIGHTS TO CONTINUE BUSINESS**

The right of the remaining members of the Company to continue the business on the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Company shall be upon the consent of all of the remaining members in accordance with the terms and conditions of the Operating Agreement to continue the business of the Company, provided that there is at least one (1) remaining member.

**ARTICLE 7.
AMENDMENTS**

The Company reserves the right to amend, alter, change or repeal any provision contained in these Articles of Organization, in the manner now or hereafter prescribed by the Act.

IN WITNESS WHEREOF, the undersigned, being one of the members of the Company, has hereunto set his hand this 2nd day of OCTOBER, 2003.



JOHN ANASTASIA

ARTICLES OF ORGANIZATION
FOR
SLADE PROPERTIES, LLC

Page 3 of 3

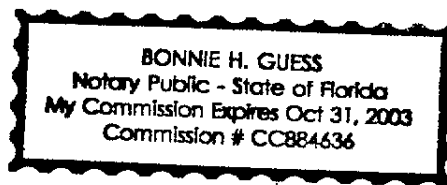
STATE OF FLORIDA
COUNTY OF MARION

The foregoing ARTICLES OF ORGANIZATION were acknowledged before me by JOHN ANASTASIA as a member of the above named limited liability company, who is:

☒ personally known by me; OR
☐ produced a driver's license as identification.

Dated: this 22nd day of October 2003.

Bonnie H. Guess
Print Name: Bonnie H. Guess
Notary Public, Commonwealth of Virginia Sta 60
Commission number 1013103 Fla. Dr
Commission expires CC 884636



**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/ REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: *Slade Properties, LLC.*
2. The name and address of the registered agent and office is:

John Anastasia
103 NE Sanchez Avenue
Ocala, FL 34470

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.



JOHN ANASTASIA

Date: *October 22nd*, 2003