## 103000051230

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(Only Glete Elph Hone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(
Cartificad Carrier Cartification of Otatica
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100025034711

12/02/03--01016--003 \*\*125.00

SECRETABLE OF STATE

3-51230

## TRANSMITTAL LETTER

	stration Section sion of Corporations			
SUBJECT:	Windhorse Properties, 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:			
	Steve Prenner			
	(Name of Person)			
-	(Firm/Company)			
	[844 N. Nob Hill Nob #163			
	(Address)			
	Plantation, FL 33322			
	(City/State and Zip Code)	_	•	
	formation concerning this matter, please call:    Teve Prenner	SECRETARY	03 DEC I	
	(	CF ST	PH 4	Ţ

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

The same of the statement of the section of the sec

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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nam The name of the Lin	e: nited Liability Compa	ny is:					
	Windharse	Proper	ries, LL	. C			
ARTICLE II - Add The mailing address	Iress: and street address of	the principal	office of the L	imited Liab	ility Com	pany	is:
Principal Office Ad	<u>ldress:</u>		Mailing Ad	dress:			
1844 N.	Nob Hill Rd. #1	63					
Plantation	1, FL 33322						
		•		<del></del>	····		
		•		·	<u> </u>		
Plant ation  ARTICLE III - Reg The name and the Fl	gistered Agent, Regis	stered Office,	& Registere	d Agent's S	ignature:	궁	
The name and the Fl	orida street address of	f the registere	d agent are:			DEC	
	Steve	Prenne		_	ASSE	1	FILE
_		Name			H <sub>C</sub>	T	Ü
	1844 N. N	lob Hill K	1. 4163		ESE SES	<u>+:</u>	
_	Florida street addre	ss (P.O. Box NO	T acceptable)	<del></del>	Ŋrd		
	Plantation	/ FLO		322			
	City, S	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, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

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

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

(Use attachment if necessary)  NOTE: An additional article must be added if an effective date is requested.  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.)	Title: "MGR" = Manage "MGRM" = Mana		Name and Address:			
(Use attachment if necessary)  NOTE: An additional article must be added if an effective date is requested.  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.)	MGRM		Steven Prenner			
NOTE: An additional article must be added if an effective date is requested.  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.)			1844 N. Nob HILL Rd #1	63_	•	
NOTE: An additional article must be added if an effective date is requested.  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.)		- <u> </u>			-	
NOTE: An additional article must be added if an effective date is requested.  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.)						
NOTE: An additional article must be added if an effective date is requested.  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.)		<del>_</del>				
NOTE: An additional article must be added if an effective date is requested.  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.)		· - · · · · · · · · · · · · · · · · · ·				
NOTE: An additional article must be added if an effective date is requested.  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.)	· , ,	<del></del> >	4.		-	-
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.)	(Use attachment if	necessary)			.=	
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.)		NATURE:	_	SECRLIARY OF STAT	03 DEC -1 PH 4:1	
of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	Signat	ure of a member or an au	thorized representative of a member.	Sm		٠
	of this	document constitutes an af	firmation under the penalties of periury			
Typed or printed name of signee		54eve	1 Prenner			

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)