

LD40000007388

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H04000018961 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : HUBCO
Account Number : 104662003400
Phone : (516) 935-3940
Fax Number : (516) 935-3088

LIMITED LIABILITY COMPANY

1223 Molona Holdings LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

RECEIVED
04 JAN 27 PM 4:43
DIVISION OF CORPORATION
04 JAN 27 AM 10:53
SECRETARY OF STATE
TALLAHASSEE FL 32310

Electronic Filing Menu

Corporate Filing

Public Access Help

JB
1-28-04

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

H04000018961

ARTICLE I - Name

The name of the Limited Liability Company is: **1223 Molona Holdings LLC**

ARTICLE II - Address

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

Principal Office Address:

Mailing Address:

1223 Molona Street

1223 Molona Street

Reunion, FL 34747

Reunion, FL 34747

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

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

Linda Potter

Name

6641 SE 51st Street

(P.O. Box or Mail Drop Box NOT Acceptable)

Okeechobee, FL 34974

(City / State / 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, F.S.

X

Linda Potter

Registered Agent's Signature - Linda Potter

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 JAN 27 2010 5:53

FILED

H04000018961

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

H04000018961

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

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGRM

Susan Lynch - 85 Laurel Brook Road, Middlefield, CT 06455

MGRM

Charles Lynch - 85 Laurel Brook Road, Middlefield, CT 06455

MGRM

Noreene Carlson - 85 Laurel Brook Road, Middlefield, CT 06455

MGRM

Howard Carlson - 85 Laurel Brook Road, Middlefield, CT 06455

(Use attachment if necessary)

REQUIRED SIGNATURE:

X 
Signature of a member or 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.)

Susan Lynch

Typed or printed name of signee

04 JUN 27 AM 10:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

H04000018961