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(Re	questor's Name)	-
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Coples	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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DEGAL VISION OF COLUMN STATE TALLAMASSET STORIDA

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Reinstatement

Name Reservation

UCC FILING & SEARCH SERVICES, INC. 526 East Park Avenue Tallahassee, Florida 32301 (850) 681-6528

HOLD FOR PICKUP BY **UCC SERVICES** OFFICE USE ONLY

CORPORATION NAME (S) AND DOCUMEN

Florida Econoland Homes, LLC

	Filing Evidence □ Plain/Confirmation Copy	Type of Document ☐ Certificate of Status
	☑ Certified Copy	☐ Certificate of Good Standing
		□ Articles Only
	Retrieval Request Photocopy	 □ All Charter Documents to Include Articles & Amendments □ Fictitious Name Certificate
	□ Certified Copy	□ Other
	NEW FILINGS	AMENDMENTS
	Profit	Amendment
	Non Profit	Resignation of RA Officer/Director
Х	Limited Liability	Change of Registered Agent
	Domestication	Dissolution/Withdrawal
	Other	Merger
		-
	OTHER FILINGS	REGISTRATION/QUALIFICATION
	Annual Reports	Foreign
	Fictitious Name	Limited Liability

Reinstatement

Trademark

Other

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

FLORIDA ECONOLAND HOMES, LLC

ARTICLE II - Address:

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

Principal Office Address:

4428 SE 18TH PLACE, SUITE 2

CAPE CORAL, FL 22004

Mailing Address:

4426 SE 18TH PLACE, SUITE 2

CAPE CORAL FL 33904

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

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

KURT G. SCHIEBER

KURT G. SCHJEBER

Name

8268-4 WESTSHORE DRIVE

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

FORT MYERS

FL_ 33907

City, 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, F.S..

Serviced Alent's Signatur

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address: "MGR" = Manager "MGRM" = Managing Member ANAY BORY MOMR 4428 SE 16TH PLACE, SUITE 2 CAPE CORAL, FL 33804 (Use attachment if necessary) NOTE: An additional article must be added if an effective date is requested. REQUIRED SIGNATURE: Signature of a member open authorized representative of a member. (In accordance with section 808.408(3), Florida Statutes, the exception of this document constitutes an affirmation under the penalties of perfury that the facts stated becein are true.) ANAY BORY Typed or printed name of algaes Filing Feet; 3100.00 Filing Fee for Articles of Organization 5 25.06 Besignation of Registered Agent

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)