

L040000019185

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS
04 MAR - 1 AM 8:29

LR 03/12/04

4p

Gary Medley
663 Woodridge Drive
Fern Park, FL 32730-2932

February 26, 2004

Department of the State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Formation of LAND TRUST SERVICES, LLC

Dear Sir:

Enclosed is one (1) original and one (1) copy of the Articles of Organization for the above references Limited Liability Company.

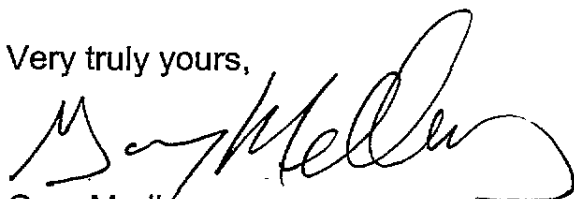
Enclosed are the following filing fees:

\$100.00	Filing Fee for the Articles of Organization
25.00	Designation of Registered Agent
30.00	Certified Copy
<u>5.00</u>	Certificate of Status
\$160.00	Total Remittance

Please return an original filed copy of the Articles and Certificate of Status to the above address.

Your attention to this matter is appreciated.

Very truly yours,


Gary Medley

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**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

Land Trust Services, LLC

ARTICLE II - Address:

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

Principal Office Address:

675 Douglas Avenue

Altamonte Springs, FL 32714

Mailing Address:

663 Woodridge Drive

Fern Park, FL 32730

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

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

Gary Medley

Name

675 Douglas Avenue

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

Altamonte Springs, FLORIDA 32714

City, State, and Zip

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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

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

Gary Medley

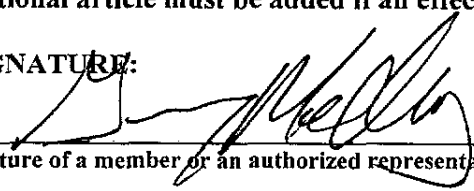
663 Woodridge Drive

Fern Park, FL 32730-2932

(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.)

Gary Medley

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)

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