

# L04000030076

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

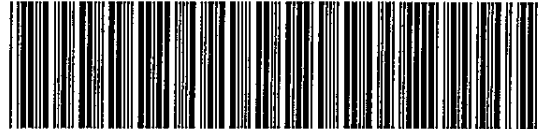
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LAW OFFICE OF  
**SHEREE H. LANCASTER, P.A.**  
109 EAST WADE STREET  
POST OFFICE BOX 1000  
TRENTON, FLORIDA 32693  
PHONE: (352) 463-1000  
FAX: (352) 463-2939

April 13, 2004

Florida Department of State  
Registration Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

RE: Articles of Organization for B & S Land, LLC

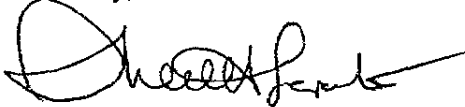
Dear Sir/Madam:

Enclosed please find my check in the amount of \$155.00 representing the following:

\$100.00	Filing Fee for Articles of Organization
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy

Please file the enclosed Articles of Organization for B & S Land, LLC and return the certified copy and letter of acknowledgment to my office. Thank you for your attention in this matter.

Sincerely,



Sheree H. Lancaster

SHL/tfs

Enclosures

c: Damon Sandlin

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## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: B & S LAND, LLC  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fec(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sheree H. Lancaster, Esq.  
(Name of Person)

Sheree H. Lancaster, P.A.  
(Firm/Company)

Post Office Box 1000  
(Address)

Trenton, Florida 32693-1000  
(City/State and Zip Code)

For further information concerning this matter, please call:

Sheree H. Lancaster at ( 352 ) 463-1000  
(Name of Person) (Area Code & Daytime Telephone Number)

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

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

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**ARTICLES OF ORGANIZATION  
FOR  
B & S LAND, LLC**

**ARTICLE I**

The name of the Limited Liability Company is:

B & S LAND, LLC

**ARTICLE II**

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

18251 NE 60<sup>th</sup> STREET  
WILLISTON, FLORIDA 32696 US

The mailing address of the Limited Liability Company is:

18251 NE 60<sup>th</sup> STREET  
WILLISTON, FLORIDA 32696 US

**ARTICLE III**

The purpose for which this Limited Liability Company is organized is:

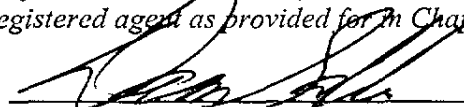
ANY AND ALL LAWFUL BUSINESS.

**ARTICLE IV**

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

DAMON SANDLIN  
18251 NE 60<sup>th</sup> STREET  
WILLISTON, FLORIDA 32696 US

*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 Signature: DAMON SANDLIN

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**ARTICLE V**

The name and address of managing members/managers are:

Title: MGRM  
Damon Sandlin  
18251 NE 60<sup>th</sup> Street  
Williston, Florida 32696 US

Title: MEM  
Sharon Sandlin  
18251 NE 60<sup>th</sup> Street  
Williston, Florida 32696 US

Title: MEM  
Jason W. Bergdoll  
16851 NE 60<sup>th</sup> Street  
Williston, Florida 32696 US

Title: MEM  
Dara S. Bergdoll  
16851 NE 60<sup>th</sup> Street  
Williston, Florida 32696 US

**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.)

\_\_\_\_\_  
**DAMON SANDLIN**

Typed or printed name of signee

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