

L04000036819

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

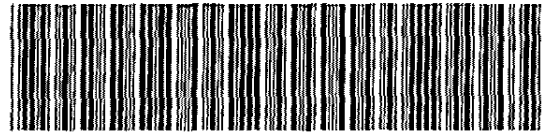
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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04 MAY 14 PM 1:26

DIVISION OF REGISTRATION

BK

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04 MAY 14 PM 4:58

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Bencor Properties, LLC

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04 MAY 14 PM 4:58  
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TALLAHASSEE, FLORIDA

\_\_\_ Art of Inc. File \_\_\_  
\_\_\_ LTD Partnership File \_\_\_  
\_\_\_ Foreign Corp. File \_\_\_  
\_\_\_ ✓ L.C. File \_\_\_  
\_\_\_ Fictitious Name File \_\_\_  
\_\_\_ Trade/Service Mark \_\_\_  
\_\_\_ Merger File \_\_\_  
\_\_\_ Art. of Amend. File \_\_\_  
\_\_\_ RA Resignation \_\_\_  
\_\_\_ Dissolution / Withdrawal \_\_\_  
\_\_\_ Annual Report / Reinstatement \_\_\_  
\_\_\_ ✓ Cert. Copy \_\_\_  
\_\_\_ Photo Copy \_\_\_  
\_\_\_ Certificate of Good Standing \_\_\_  
\_\_\_ Certificate of Status \_\_\_  
\_\_\_ Certificate of Fictitious Name \_\_\_  
\_\_\_ Corp Record Search \_\_\_  
\_\_\_ Officer Search \_\_\_  
\_\_\_ Fictitious Search \_\_\_  
\_\_\_ Fictitious Owner Search \_\_\_  
\_\_\_ Vehicle Search \_\_\_  
\_\_\_ Driving Record \_\_\_  
\_\_\_ UCC 1 or 3 File \_\_\_  
\_\_\_ UCC 11 Search \_\_\_  
\_\_\_ UCC 11 Retrieval \_\_\_  
\_\_\_ Courier

Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up

5/14/04

11:45

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

BENCAR PROPERTIES, LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

11262 U.S. Hwy. 301

Oxford, FL 34484

**Mailing Address:**

11262 U.S. Hwy. 301

Oxford, FL 34484

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

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

REGINALD P. CARUTHERS

Name

11262 U.S. Hwy. 301

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

Oxford

FLORIDA

34484

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, Florida Statutes.*



Registered Agent's Signature

Reginald P. Caruthers

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TALLAHASSEE, FLORIDA

**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

Reginald P. Caruthers

11262 U.S. Hwy. 301

Oxford, FL 34484

MGMR

James E. Bennett

7390 S.E. Hwy. 42

Summerfield, FL 34491

(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.)

Reginald P. Caruthers

\_\_\_\_\_  
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)**