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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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May 27, 2004

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

Re: Regency Stable, LLC.

Dear Sir/Madam:

Enclosed herewith, you will find Articles of Organization for the above mentioned entity, as well as, \$100 filling fee for the Articles of Organization, \$25.00 for Designation of Registered Agent, and \$30.00 for a Certified Copy, for a total amount of \$155.00.

Please return the Certified Copy stamped "filed", and all correspondence concerning this matter to the following:

Richard W. Sacco Regency Stable, LLC. 3240 SW 34 Street, #1212 Ocala, FL 34474

For further information concerning this matter, please call me at (352) 266-0268

Very Truly Yours,

Richard W. Sacco

Enc.

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Regency Stable, LLC (Name of Limited Liability Company)			
The enclosed Articles of Organization and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Richard W. Sacco (Name of Person)			
(Firm/Company)			
3240 SW 34 Street, #1212	TALLAI	nr ho	7
Ocala, FL 34474 (City/State and Zip Code)	HASSEE.	N-1 PM	П
For further information concerning this matter, please call:	708 108	1: 58	J
Barbara Calleja at (352) 861-8375 (Name of Person) (Area Code & Daytime Telephone Number)	ORIO A	00	· 22

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:			
Regency Stable	, LIC		
ARTICLE II - Address: The mailing address and street address of the principal	office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		
3240 SW 34 Street	3240 Sw 34 Street		
1/212	41212		
Ocala, FL 34474	Ocala, FL 34474		
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are: Pichard W. Sacco Name 3240 Sw 34 Street #1212 Florida street address (P.O. Box NOT acceptable) Deala Florida 34474			
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

Page 1 of 2 (CONTINUED)

Title: "MGR" = Manager "MGRM" = Managing Member MGRA Richard W. Sacco 3240 Sw 34 Shreet #1212 Ocala, FL 34474 (Use attachment if necessary) NOTE: An additional article must be added if an effective date is requested. Let a salary and salary are salary as a salary are salary. REQUIRED SIGNATURE:

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

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

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)

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 penaltics of perjury

Chard W. Sacco
Typed or printed name of signee

that the facts stated herein are true.)