

L04000052936

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

L04000052936

Office Use Only



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07/16/04--01045--004 **125.00

RECEIVED
04 JUL 16 PM 12:53
DIVISION OF CORPORATION

FILED
04 JUL 16 PM 3:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BK

ATTORNEYS' TITLE

Requestor's Name

1965 Capital Circle NE, Suite A

Address

Tallahassee, Fl 32308

City/St/Zip

850-222-2785

Phone #

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1- LOVELAND HOLDINGS, LLC

2-

3-

4-

☒ Walk-in

☐ Pick-up time ASAP

☐ Certified Copy

☐ Mail-out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS

<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS

<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION

<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION OF LOVELAND HOLDINGS, LLC

ARTICLE I — Name

The name of the Limited Liability Company is **LOVELAND HOLDINGS, LLC**.

ARTICLE II — Address

The mailing address and street address of the principal office of the Limited Liability Company is 18401 Murdock Circle, Port Charlotte, Florida 33948-1088.

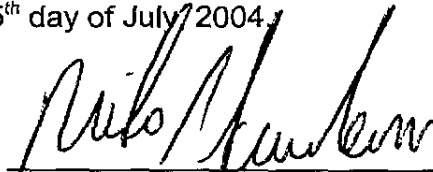
ARTICLE III — Registered Agent & Registered Office

The name and street address of the registered agent of the Company is **Miko P. Gunderson, Esq.**, 1861 Placida Road, Suite 204, Englewood, Florida 34223-4949.

ARTICLE IV — Management

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company.

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this 15th day of July 2004.



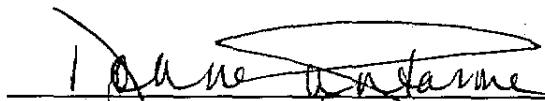
Miko P. Gunderson, Esq.
Authorized Representative of Member

STATE OF FLORIDA)
) ss.
COUNTY OF CHARLOTTE)

The foregoing instrument was sworn to and acknowledged before me this 15th day of July, 2004, by MIKO P. GUNDERSON, ESQ., who is personally known to me and who did take an oath.



Donna Santarone
MY COMMISSION # DD199855 EXPIRES
April 23, 2007
BONDED THRU TROY FAIN INSURANCE, INC.



Notary Public, State of Florida
My Commission Expires:

ACCEPTANCE OF REGISTERED AGENT

The undersigned, being the person named in the Articles of Organization of **LOVELAND HOLDINGS, LLC**, as the registered agent of this limited liability company, hereby consents to accept service of process for the above stated Company at the place designated in the Articles of Organization, and accepts the appointment as registered agent and agrees to act in this capacity. The undersigned *further agrees to comply with* the provisions of all statutes relating to the proper and complete performance of my duties, and is familiar with and accepts the obligations of the position of registered agent.

DATED this 15th day of July, 2004.

A handwritten signature in black ink, appearing to read "Miko P. Gunderson", written over a horizontal line.

Miko P. Gunderson, Esq.

51884a02