

Florida Department of State  
Division of Corporations  
Public Access System

## Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H04000178329 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

## To:

Division of Corporations  
Fax Number : (850) 205-0383

## From:

Account Name : EUGENE A. WIECHENS, P.A.  
Account Number : I20010000161  
Phone : (352) 732-8622  
Fax Number : (352) 732-1162

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

04 AUG 31 PM 12:36

FILED

## LIMITED LIABILITY COMPANY

## FLEMINGTON FIELDS, LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

Electronic Filing Menu

Corporate Filing

Public Access Help

HO4000178329 3

## ARTICLES OF ORGANIZATION

for

### **FLEMINGTON FIELDS, LLC**

(a Florida Limited Liability Company)

#### ARTICLE I

##### Name & Address

The name of the Limited Liability Company is: Flemington Fields, LLC., and the mailing address and principal office of the Company is: 13000 N.W. County Road 318, Williston, Florida 32696.

#### ARTICLE II

##### Duration

This Limited Liability Company shall have a perpetual existence.

#### ARTICLE III

##### Purpose

This Limited Liability Company is organized for the purpose of transacting any and all lawful business, including especially all that is authorized by Fla. Stat., Ch. 608.

#### ARTICLE IV

##### Registered Agent, Registered Office, & Registered Agent's Signature & Acceptance

The name and the Florida street address of the registered agent are: Delia Marie Love, 13000 N.W. County Road 318, Williston, Florida 32696.

I, Delia Marie Love, 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 consent to and 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 Fla. Stat., Chapter 608.

Date: 8-31-04

Delia Marie Love  
Registered agent

STATE OF FLORIDA  
TALLAHASSEE

04 AUG 31 PM 12:36

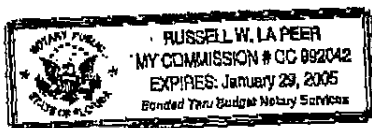
FILED

H04000178329 3

STATE OF FLORIDA  
COUNTY OF MARION

BEFORE ME, the undersigned authority, personally appeared Delia Marie Love, as Registered Agent, to me well known as the person described in and who acknowledged before me that she executed the foregoing freely and voluntarily for the purposes therein expressed, on this 31 day of August, 2004, took an oath administered by me.

SEAL/STAMP



Russell W. LaPeer  
Name & commission number of notary

ARTICLE V  
Amendments

The power to amend these articles shall be held exclusively by the members, and any amendment hereto shall required a 70% vote of all members' interests in the Company.

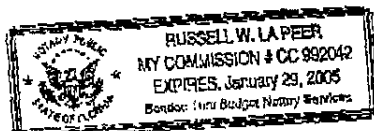
Delia Marie Love  
Delia Marie Love, Member-organizer

(In accordance with Fla. Stat. § 608.408 (3), the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

STATE OF FLORIDA  
COUNTY OF MARION

BEFORE ME, the undersigned authority, personally appeared Delia Marie Love, as Member-Incorporator, to me well known as the person described in and who acknowledged before me that he executed the foregoing freely and voluntarily for the purposes therein expressed, on this 31 day of August, A.D. 2004, took an oath administered by me.

SEAL/STAMP



Russell W. LaPeer  
Name & commission number of notary

H04000178329 3