

LD 4 0000 84 541

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

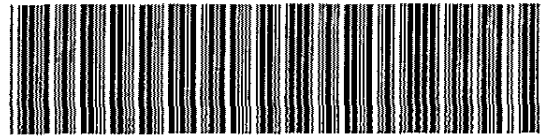
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200042677102

11/16/14--01068--005 **160.00

ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 11/16/14 BY 60322
TALLAHASSEE, FLORIDA

04 NOV 16 AM 11:42

FILED

11/22
NLT

FAX

The Keelan LLC
11280 Compass Point Drive Fort Myers, Fl. 33907
Phone (239)931-3330 Fax (239)931-3331

Date: November 15, 2004

FILED
04 NOV 16 AM 11:42
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: THE KEELAND 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:

JOSEPH WILLOUGHBY
(Name of Person)

(Firm/Company)

11280 COMPASS POINT DRIVE
(Address)

FT MYERS FL 33908
(City/State and Zip Code)

For further information concerning this matter, please call:

SHELLY WELLMAN at (239) 931-3330
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) | <input checked="" type="checkbox"/> \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
|--|---|---|--|

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

FILED
04 NOV 16 AM 11:42
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

THE KEELAND LLC

ARTICLE II - Address:

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

Principal Office Address:

15301 MCGREGOR BLVD
FT MYERS FL 33908

Mailing Address:

11280 COMPASS POINT DRIVE
FT MYERS FL 33908

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

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

JONI WILLOUGHBY

Name

11280 COMPASS POINT DRIVE

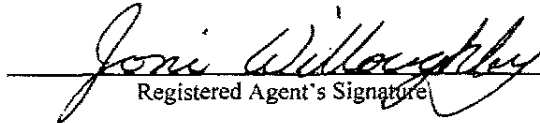
Florida street address (P.O. Box **NOT** acceptable)

FT MYERS 33908

FL

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, F.S..


Registered Agent's Signature

(CONTINUED)

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:

MGR

JOSEPH WILLOUGHBY

11280 COMPASS POINT DRIVE

FT MYERS FL 33908

MGRM

JONI WILLOUGHBY

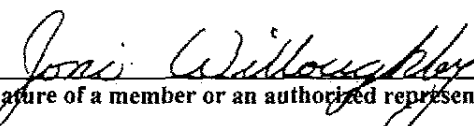
11280 COMPASS POINT DRIVE

FT MYERS FL 33908

(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.)

JONI WILLOUGHBY

Typed or printed name of signee

Filing Fees:

**\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent**

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

FILED
04 NOV 16 AM 11:42
HALL COUNTY, FLORIDA