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Florida Department of State
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To:

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

From:

Account Name : ROBERTS, SEWARD & COMPANY PA
Account Number : I20040000178
Phone : (813)225-1040
Fax Number : (813)221-3135

RECEIVED
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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

Brandon Family Partners, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

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05 MAR 30 PM 09:56
TALLAHASSEE, FLORIDA

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T. Brumbley MAR 31 2005

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

BRANDON FAMILY PARTNERS, LLC**ARTICLE II - Address:**

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

Principal Office Address:414 W. ROBERTSON ST.
BRANDON, FL 33510Mailing Address:-SAME-**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

MICHAEL DAVIS

Name

414 W. ROBERTSON ST.Florida street address (P.O. Box NOT acceptable)BRANDONFL 33510

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)

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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:MGRMMICHAEL DAVIS414 W. ROBERTSON STBRANDON, FL 33510MGRMRANDELL SEHRES414 W. ROBERTSON STBRANDON, FL 33510MGRMDAVID THIELE414 W. ROBERTSON STBRANDON, FL 33510MGRMDIANA ROGUE414 W. ROBERTSON STBRANDON, FL 33510

(Use attachment if necessary) SEE ATTACHMENT

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.)

MICHAEL DAVIS

Typed or printed name of signer

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)

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

JOHN FEHLING

414 W. ROBERTSON ST

BRANDON, FL 33510

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