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4 BRYAN JUL - 8 2005

TRANSMITTAL LETTER

TO: Registration Se Division of Co			
SUBJECT: The Caro	H. Conover Property Mane		
	(Name of Limited	l Liability Company)	
The enclosed Articles of	f Organization and fee(s) are sa	abmitted for filing.	
Please return all corresp	ondence concerning this matte	r to the following:	
Carol H.	Conover		
	()	(ame of Person)	
	O	irm/Company)	
1366 Augus	stine Drive		200
	·	(Address)	A SUN
The \	/illages, FL 32159		2005 JUL -5 PH 12: 46 DIVILLAHASSEE, FLORID
****		State and Zip Code)	門里
			FL 2: 1
For further information	concerning this matter, please	call:	ABO to
		050 0055	P 75
Carol H. Conover	of Person)	at (352) 259-2055 (Area Code & Daytime To	elenhone Number)
(11mm)	of A Clausia	(rider posse to may trust in	osepsidae A residua)
Enclosed is a check for	or the following amount:		
☐ \$125,00 Filing Fee	☐ \$130.00 Filing Fee &	S155.00 Filing Fee &	
	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy
		(mannami anh) in amenaem)	(additional copy is enclosed)
		- ···	
	ET ADDRESS: tration Section	MAILING A Registration S	
	on of Corporations	Division of Co	

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:					
The name of the Limited Liability Company is:					
The Carol H. Conover Property Management Co., LLC					
ARTICLE II - Address: The mailing address and street address of	CLE II - Address: ailing address and street address of the principal office of the Limited Liability Company is:				
Principal Office Address:	Mailing Address:				
1366 Augustine Drive	1366 Augustine Drive				
The Villages, FL 32159	The Villages, FL 32159				
ARTICLE III - Registered Agent, Regi The name and the Florida street address of Carol H. Conover	stered Office, & Registered Agent's Signature of the registered agent are: Name Treet address (P.O. Box NOT accentable)				
1366 Augustine Drive	TLO Z. 4				
Florida st	reet address (P.O. Box NOT acceptable)				
The Villages, FL 32159	FL.				
City,	State, and Zip				
liability company at the place designate registered agent and agree to act in this constatutes relating to the proper and comp	and to accept service of process for the above stated limited ted in this certificate, I hereby accept the appointment as apacity. I further agree to comply with the provisions of all elete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 608, F.S				
Carl & Con Registered	Agent's Signature				

(CONTINUED)

Page 1 of 2

<u>Fitle:</u> 'MGR" = Manager 'MGRM" = Managing Member	Name and Address:
MGR	Carol H, Conover
	1366 Augustine Drive
	The Villages, FL 32159
IGRM	James H. Conover
	1366 Augustine Drive
	The Villages, FL 32159
Use attachment if necessary)	
• ,	
NOTE: An additional article m	ust be added if an effective date is requested.
REQUIRED SIGNATURE:	
Signature of a me (In accordance wit of this document c	mber or an authorized representative of a member. th section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury ted herein are true.)

Filing Fees:

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

Carol H. Conover

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee