L05000073885

(Requestor's Name)			
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(Ĉity/S	State/Zip/Phone #)		
PICK-UP	WAIT	MAIL	
(Busin	ess Entity Name)		
(Document Number)			
Certified Copies	Certificates of	Status	
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TRANSMITTAL LETTER

Division of Con				
SUBJECT: REGI	ONAL PROPERTY GRO (Name of Limited	OUP L. L. C. I Liability Company)		
The enclosed Articles of	Organization and fee(s) are st	abmitted for filing.		
Please return all correspondent	ondence concerning this matte	r to the following:		
B	Regina Evans (1	Name of Person)		
G	eorge Trenen Bush			
	()	Firm/Company)		
2	OF AUG V CE			
	05 Ave K SE	(Address)		
<u></u> W	inter Haven, Fl 3 (City/	3880 State and Zip Code)		
For further information of	concerning this matter, please	call:		
Regina E (Name	vans of Person)	at (<u>863</u>) <u>401-886</u> (Area Code & Daytime Te		
Enclosed is a check fo	r the following amount:			
\$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
STRE	ET ADDRESS:	MAILING A	DDRESS:	
Regist	ration Section	Registration S	ection	
	Division of Corporations 409 E. Gaines Street Division of Corporations P.O. Box 6327			
			Tallahassee, Florida 32314	



Glenda E. Hood Secretary of State

July 14, 2005

REGINA EVANS 205 AVE K SE WINTER HAVEN, FL 33880

SUBJECT: REGIONAL PROPERTY GROUP L.L.C.

Ref. Number: W05000033799

We have received your document for REGIONAL PROPERTY GROUP L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6890.

Letter Number: 305A00046537

Jason Merrick Document Specialist

Division of Compositions D.O. P.O.V. 6297 Tollahassan Florida 29314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:				
REGIONAL PROPERTY GROUP L	-L.C.			
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liabili	ty Comp	any is:	
Principal Office Address:	Mailing Address:			
P.O. BOX 1481 HAINES CITY, FL 33844	P.O. BOX 1481 HAINES CITY, FL 33844			
ARTICLE III - Registered Agent, Register	red Office, & Registered Agent's Sig	nature:		
The name and the Florida street address of the registered agent are:		ر 50	SEC	
GEORGE TRENEN BUSH Name		WL 27	ORE TARY	
205 AVE K SE Florida street:	address (P.O. Box <u>NOT</u> acceptable)	P# +:	Y OF ST	
WINTER_HAVEN City, State	FL_33880 e, and Zip	. 5	ATE	
Having been named as registered agent and t liability company at the place designated is registered agent and agree to act in this capac statutes relating to the proper and complete accept the obligations of my position as re	in this certificate, I hereby accept the ap city. I further agree to comply with the performance of my duties, and I am fan	pointmen provision niliar with	it as is of all h and	

(CONTINUED)

Registered Agent's Signature

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
PRESIDENT	ROBERT LITTLE P.O. BOX 1481 HAINES CITY, FL 33844
VICE PRESIDENT	DAN ZITO P.O. BOX 1481 HAINES CITY, FL 33844

(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.)

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)