

LOS000096436

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

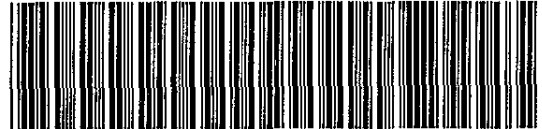
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 30 2005

THE MILLHORN LAW FIRM

Attorneys at Law

Michael D. Millhorn
Kevin A. Sentner
Eric C. Millhorn

September 22, 2005

Reply to: Lady Lake Office

Offices:

Lady Lake:
The Pines Professional Center
13710 U.S. 441
Suite 100
Lady Lake, Florida 32159
Telephone: (352) 753-9333
Facsimile: (352) 753-7447

Ocala:
416 S. E. Fort King Street
Ocala, Florida 34471
Telephone: (352) 307-2221

E-Mail: michael@millhorn.com

Secretary of State
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

RE: BEVILLE ENTERPRISES, L.L.C.

Dear Division of Corporations:

Enclosed is the executed original and one copy of the Articles of Organization for the above referenced limited liability company.

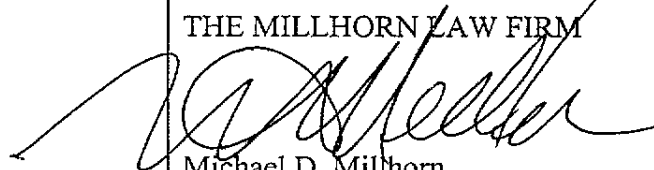
I have also enclosed my check made payable to the Secretary of State in the amount of \$155.00 to cover the costs of the following:

| | |
|----------------------|------------------|
| Filing Fee | \$ 100.00 |
| Certified Copy | \$ 30.00 |
| Registered Agent Fee | <u>\$ 25.00</u> |
| TOTAL | \$ 155.00 |

Please return the certified copy to my office. Thank you for your kind cooperation.

Sincerely,

THE MILLHORN LAW FIRM


Michael D. Millhorn
Attorney at Law

encl.

05 SEP 26 AM 8:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I — Name

The name of the Limited Liability Company is:

BEVILLE ENTERPRISES, LLC

ARTICLE II — ADDRESS

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

4731 Sw 21st Place
Ocala, Florida 34471

ARTICLE III — Duration

The period of duration for the Limited Liability Company shall be perpetual. The date and time of the company existence is the time these Articles of Organization are filed with the Secretary of State's office.

ARTICLE IV — Management

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager - managed company. The name and address of the managing member is:

DAVID M. BEVILLE
4731 Sw 21st Place
Ocala, Florida 34474

**Article V — Registered Agent, Registered Office
& Registered Agent's Signature**

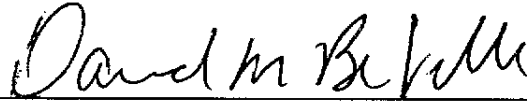
The name and Florida street address of the registered agent is:

DAVID M. BEVILLE
4731 Sw 21st Place
Ocala, Florida 34474

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

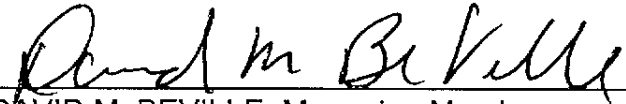
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR **BEVILLE ENTERPRISES, LLC** AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING 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.



DAVID M. BEVILLE, Registered Agent

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged
them to be my act this 9-22-05 day of September, 2005.

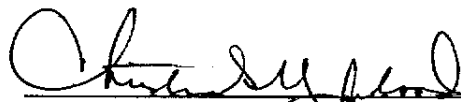


DAVID M. BEVILLE, Managing Member

STATE OF FLORIDA
COUNTY OF SUMTER

BEFORE ME, a Notary Public authorized in the State and County set forth above,
personally appeared DAVID M. BEVILLE, who produced as identification, as Managing
Member, and acknowledged before me that he executed the foregoing Articles of Organization
of BEVILLE ENTERPRISES, LLC.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the
State and County aforesaid, this 22nd day of September, 2005.



CHRISTINE S. YOUNGBLOOD
NOTARY PUBLIC

My Commission Expires:

FILED
05 SEP 26 AM 8:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Christine S. Youngblood
Notary Public, State of FLORIDA
My Commission #DD124936
Expires JULY 30, 2006
Bonded thru TROY FAIN INSURANCE, INC.