

L05000106200

(Requestor's Name)

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☐ PICK-UP

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(Business Entity Name)

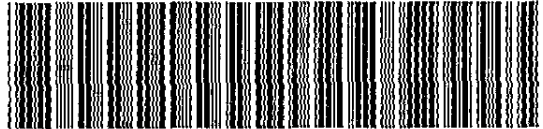
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05 NOV - 1 AM 10:42  
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TALLAHASSEE, FLORIDA

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Lewis Road Partnership, LLC

05 NOV 11 AM 10:42  
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- ☐ Art of Inc. File
- ☐ LTD Partnership File
- ☐ Foreign Corp. File
- ☒ L.C. File
- ☐ Fictitious Name File
- ☐ Trade/Service Mark
- ☐ Merger File
- ☐ Art. of Amend. File
- ☐ RA Resignation
- ☐ Dissolution / Withdrawal
- ☒ Annual Report / Reinstatement
- ☒ Cert. Copy
- ☐ Photo Copy
- ☐ Certificate of Good Standing
- ☐ Certificate of Status
- ☐ Certificate of Fictitious Name
- ☐ Corp Record Search
- ☐ Officer Search
- ☐ Fictitious Search
- ☐ Fictitious Owner Search
- ☐ Vehicle Search
- ☐ Driving Record
- ☐ UCC 1 or 3 File
- ☐ UCC 11 Search
- ☐ UCC 11 Retrieval

Signature

Requested by:

Name

Date

Time

WL 11/1 9:00



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

November 1, 2005

CAPITAL CONNECTION

TALLAHASSEE, FL

SUBJECT: LEWIS ROAD PARTNERSHIP, LLC

Ref. Number: W05000049406

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
**RE-SUBMIT**  
PLEASE OBTAIN THE ORIGINAL  
FILE DATE

We have received your document for LEWIS ROAD PARTNERSHIP, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have retained your \$155.00 payment.

Florida LLC's may not use the word "PARTNERSHIP" in their names.

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) 245-6914.

Buck Kohr  
Document Specialist

Letter Number: 305A00065688

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**RE-SUBMIT**  
PLEASE OBTAIN THE ORIGINAL  
FILE DATE

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:** Lewis Road Partners, LLC  
The name of the Limited Liability Company is:

**ARTICLE II - Address:** 631 West Lunsden Road, Brandon, FL 33511  
The mailing address and street address of the principal office of the Limited Liability Company is:

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

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

Michael D. Graves  
Name  
6507 North Five Acre Road  
Florida street address (P.O. Box NOT acceptable)  
Plant City FL 33565  
City, State, and Zip

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*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.*

Michael D. Graves  
Registered Agent's Signature

**Article IV - Management (Check box if applicable.)**

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Robert M. Ekemy  
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.)

Robert M Ekemy  
Typed or printed name of signer

**Filing Fees:**

\$100.00 Filing Fee for Articles of Organization  
\$ 25.00 Designation of Registered Agent  
\$ 30.00 Certified Copy (Optional)  
\$ 5.00 Certificate of Status (Optional)