## 12500119600

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



000062071460

12/13/05--01008--013 \*\*130.00

DIVISION OF CORPORATION

## **COVER LETTER**

TO: Registration Section Division of Corporations  SUBJECT: LES of Palm Harbor LLC
(Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Anmarie Stewart (Name of Person)
(Name of Person)
(Firm/Company)
2836 Waters Edge Road &
(Address)
Palm Harbor FL 34685  (City/State and Zip Code)  For further information concerning this matter, please call:
(City/State and Zip Code)
For further information concerning this matter, please call:
Annmarie Stewart #1727,772-7030
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\times \text{\$130.00 Filing Fee} & \times \text{\$155.00 Filing Fee} & \times \text{\$160.00 Filing Fee}, \\ \text{Certificate of Status} & \text{Certified Copy} & \text{Certified Copy} \\ \text{(additional copy is enclosed)} & \text{Certified Copy} \\ \text{(additional copy is enclosed)}
Mailing Address Street/Courier Address  Registration Section Registration Section
Registration Section Registration Section Division of Corporations Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:		
LES of Palm Hazbor, LLC (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C."	<del></del> ")	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability	Compa	ny is:
Principal Office Address: Mailing Address:		_
2836 waters Edge Road 2836 waters Edge Palm Harbor, FL 34685 Palm Harbor, FL	-Roa	L
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signs (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or business entity with an active Florida registration.)		<b>5</b>
The name and the Florida street address of the registered agent are:  Annuale Huxet  Name  2836 Waters Edge Road  Florida street address (P.O. Box NOT acceptable)  Palm Haxbor FL 34655  City, State, and Zip	2005 DEC 13 AM 7: 47	FILED SECRETARY OF STATE HVISION OF CORPORATIONS
Having been named as registered agent and to accept service of process for the above liability company at the place designated in this certificate, I hereby accept the appreciatered agent and agree to act in this capacity. I further agree to comply with the pastatutes relating to the proper and complete performance of my duties, and I am family accept the obligations of my-position as registered agent as provided for in Chapter	ointment rovisions liar with	t as s of all s and

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

## 

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

Typed or printed name of signee

Filing Fees:

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

that the facts stated herein are true.)

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