

LOG 0000 14454

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

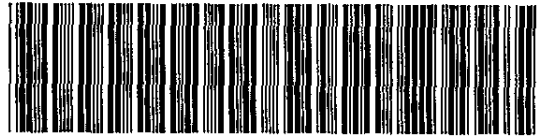
Certificates of Status _____

Special Instructions to Filing Officer:

789, 2826, 671

Office Use Only

W06-3990



600063637946

01 2005 0000 000 0000

FILED
OCT 9 - 9 PM 1:51
STATE
CANADA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CHESTNUT RIDGE TOWNHOMES 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:

JONATHAN B. SMITH

(Name of Person)

CHESTNUT RIDGE TOWNHOMES LLC

(Firm/Company)

2450 BELL RIDGE DRIVE

(Address)

CRESTVIEW, FLORIDA 32536

(City/State and Zip Code)

For further information concerning this matter, please call:

JONATHAN B. SMITH

(Name of Person)

at (850)

682-0748

(Area Code & Daytime Telephone Number)

Enclosed is a check for 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)

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED
05 FEB -8 PM 1:51
STATE
FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 26, 2006

JONATHAN B. SMITH
2450 BELL RIDGE DRIVE
CRESTVIEW, FL 32536

SUBJECT: CHESTNUT RIDGE TOWNHOMES LLC
Ref. Number: W06000003990

We have received your document for CHESTNUT RIDGE TOWNHOMES LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on January 20, 2006. Please amend your document accordingly.

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) 245-6097.

Marsha Thomas
Document Specialist

Letter Number: 906A00005706

FILED
06 FEB -9 PM 1:51
DIVISION OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CHESTNUT RIDGE TOWNHOMES LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

2450 BELL RIDGE DRIVE
CRESTVIEW, FL 32536

Mailing Address:

% JONATHAN B. SMITH
P O BOX 2033
CRESTVIEW, FL 32536

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

JONATHAN B. SMITH

Name

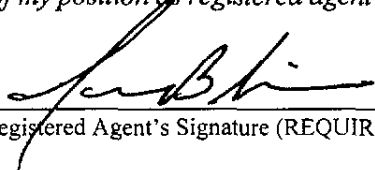
2450 BELL RIDGE DRIVE

Florida street address (P.O. Box **NOT** acceptable)

CRESTVIEW FL 32536

City, State, and Zip

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..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

FILED
06 FEB -8 PM 1:52
STATE
FLORIDA

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

"MGR"

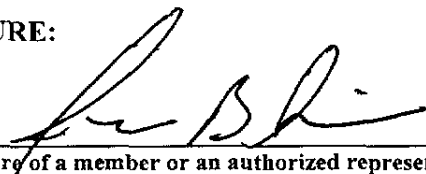
JONATHAN B. SMITH
2450 BELL RIDGE DRIVE
CRESTVIEW, FL 32536

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: JAN. 20, 2006 (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

FILED
06 FEB - 8 PM 1:52
STATE
FLORIDA

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.)

JONATHAN B. SMITH

Typed or printed name of signee

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)