# L06000039851

2006 MAR 231 P 2: 11 SECRETARY OF STATE ALLAHASSEE. FLORIG (Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP TIAW MAIL (Business Entity Name) (Document Number) Certified Copies \_ Certificates of Status Special Instructions to Filing Officer:

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#### **COVER LETTER**

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2006 MAR 23 P 2: 11

SECRETARY OF STATE
ALLAHASSEE, FLORIDA

Registration Section Division of Corporations

TO:

SUBJECT: Van Duyn Investments, 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:
Susan Van Duyn
(Name of Person)
Van Duyn Investments, LLC
(Firm/Company)
414 Smiley Court
(Address)
Winter Haven, FL 33884
(City/State and Zip Code)

For further information concerning this matter, please call:

63 326-5872
(Area Code & Daytime Telephone Number) Susan Van Duyn (Name of Person) Enclosed is a check for the following amount:

□ \$125.00 Filing Fee □ \$130.00 Filing Fee & Certificate of Status Certified Copy

☐ \$155.00 Filing Fee & (additional copy is enclosed)

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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY SECRETARY OF STATE TALLAHASSEE, FLORIDA ARTICLE I - Name: The name of the Limited Liability Company is: Van Duvn Investments, 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: **Mailing Address: Principal Office Address:** 414 Smiley Court 414 Smiley Court Winter Haven, FL 33884 Winter Haven, FL 33884 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: Susan Van Duyn Name 414 Smiley Court Florida street address (P.O. Box NOT acceptable) FL 33884 Winter Haven 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..

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

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

FILED

The name and address of each Manag	ger or Managing Member is as	follows:
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	2006 MAR 23 P 2: 11 SECRETARY OF STATE TALLAHASSEE, FLORIDA
MGRM	Anthony Vincent Van Di	
	414 Smiley Court	
	Winter Haven, FL 33884	
MGRM	Susan Elizabeth Van Du	yn
	414 Smiley Court	
	Winter Haven, FL 33884	
	<u> </u>	
(Use attachment if necessary)		
LE V: Effective date, if other than the fective date is listed, the date must be days after the date of filing.)	date of filing: 03/21/2006 e specific and cannot be more	. (OPTIONAL)  than five business days prio
REQUIRED SIGNATURE:  Signature of a member	er or an authorized representative	of a member.
(In accordance with se of this document const that the facts stated l	ction 608.408(3), Florida Statutes, the titutes an affirmation under the pena- herein are true.)	ne execution Ities of perjury
Susan E. Van Du		

### 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)

Typed or printed name of signee