# W000032920

00789 - 09896 - 00071  (Requestor's Name)  (Address)	iff date /rec. 3/ 2000677087
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)	4.3 年春年 <b>時</b> 一日日曜代一日日
(Document Number)  Certified Copies Certificates of Status	
Special Instructions to Filing Officer:  200  FT CC  EFFECTIVE DATE 3-27-06	

Office Use Only

May 37/83

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M. HODGES

# **COVER LETTER**

TO:

Registration Section

Division of Corpora	ations				
SUBJECT: Pine Gro	ve Enterprises,	LLC			
	(Name of Limited	d Liabilit	y Com	pany)	
The enclosed Articles of Org	ganization and fee(s) are so	ubmitted	for fili	ng.	
Please return all corresponde	ence concerning this matte	r to the fo	ollowin	g:	
Carole Tate	***************************************			<del></del>	
	(I	Name of P	erson)		
Pine Grove	Enterprises, LL	.C			
	0	Firm/Com	pany)		
P.O. Box 7	61				
<del></del>		(Addres	is)	·····	
High Spring	gs, FL 32655				
	(City/	State and	Zip Co	ie)	
For further information conc	erning this matter, please o	call:			
Carole Tate		at ( 38	6	, 454-07	94
(Name of Pe				de & Daytime T	elephone Number)
Enclosed is a check for the	e following amount:				
\$125.00 Filing Fee Co	\$130.00 Filing Fee & ertificate of Status	Certifi	ed Co	Filing Fee & coy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Ro Di P.	laffing Address egistration Section ivision of Corporations O. Box 6327 allahassee, FL 32314	R D C 2	legistra Division Lifton 661 Ex	courier Addression Section of Corporation Building Secutive Center Section FL 32301	ons : Circle



## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 21, 2006

CAROLE TATE PINE GROVE ENTERPRISES, LLC P.O. BOX 761 HIGH SPRINGS, FL 32655

SUBJECT: PINE GROVE ENTERPRISES, LLC

Ref. Number: W06000013483

We have received your document for PINE GROVE ENTERPRISES, 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 March 17, 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) 245-6967.

Letter Number: 706A00019145

Michelle Hodges Document Specialist

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	y is:		
Pine Grove Enterprises, LLC (Must end with the words "Limited Liability Company, "L	imited Company" or their abbreviation "LLC,	" or "L.C.,")	
ARTICLE II - Address:			
The mailing address and street address of th	e principal office of the Limited Lin	ability Con	mpany is:
Principal Office Address:	Mailing Address:		
21689 NW 190 Ave.	P.O. Box 761		
High Springs, FL 32643	High Springs, FL 32655		
The name and the Florida street address of t Carole Tate	he registered agent are:	7	8
Ne	ame	A. 3	
21689 NW 190 Ave.		- · ·	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Florida stree	t address (P.O. Box NOT acceptable)		
High Springs,	<sub>FL</sub> 32643	المساح	Marian Ma Marian Marian Marian Marian Marian Marian Marian Marian Marian Ma Marian Marian Marian Marian Ma Ma Ma Ma Ma Ma Ma Ma Ma Ma Ma Ma Ma
	ate, and Zip		ည
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cape statutes relating to the proper and complete accept the obligations of my position as r	in this certificate, I hereby accept th acity. I further agree to comply with e performance of my duties, and I an	e appointm the provisi n familiar w	ent as ons of all rith and
Paristand Assert Si	The te		

(CONTINUED)
Page 1 of 2

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
- Company of the Comp	
White the second	
(Use attachment if necessary)	
	e date of filing: March 27, 2006 . (OPTIONAL se specific and cannot be more than five business days
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.)

Carole Tate

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)