# 06000075399

(Requestor's Name)	
(Neduestors Name)	
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PICK-UP WAIT MAIL	
	,
(Business Entity Name)	_
(Document Number)	_
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06 JUL 31 PM 3:51
SECRETARY OF STATE
ALLAHASSEE. FLORIDA

06 JUL 31 PM 3: 30

J. BRYAN JUL 3:1 2006

# **COVER LETTER**

TO: Registration Se Division of Co			
SUBJECT: Lac	~n Ranger (Name of Limite	Limited Lianed Lianed Lianed Liability Company)	bility Company
The enclosed Articles of	f Organization and fee(s) are s	submitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
Ryo	in Smith	(Name of Person)	OG SE
	n Ranger		JUL 31
1970	Larchmont	Lane (Address)	PH 3: EE, FLO
	hassee FL 3		ALE ALE
	concerning this matter, please	•	
Ryan Smit	of Person)	at ( <del>880</del> ) <u></u> SGQ (Area Code & Daytime T	S-5296 Telephone Number)
Enclosed is a check for	or the following amount:		
5 \$125.00 Filing Fee	ρ \$130.00 Filing Fee & Certificate of Status	ρ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	ρ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address	Street/Courier Addre	es <u>s</u>

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

# (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "LC.,") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:

**ARTICLE I - Name:** 

**Principal Office Address:** 

The name of the Limited Liability Company is:

Laun Pranger LLC 1970 Larchmont Ln. Tallahassee PR 32305	Lawn Branger L PO Box 410 Woodville, FL 3	cc 2362
ARTICLE III - Registered Agent, Regi (The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.)  The name and the Florida street address o  Ryan Sm  1970 Lard  Florida st	on Registered Agent. You must designate an indi	
Tallahasses City,	FL 32305 State, and Zip	P

Mailing Address:

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)

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Ryan Smith 1970 Larchment Ln. Tallahassee FL 32305
·	TALL 3
<u></u>	SSEE PH 3:
(Use attachment if necessary)	
	ate of filing: (OPTIONAL)  be specific and cannot be more than five business da
Ignature of a member of	or an authorized representative of a member. on 608.408(3), Florida Statutes, the execution tes an affirmation under the penalties of perjury
that the facts stated here	ein are true.)  Smith.  d 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)