

L06000091398

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

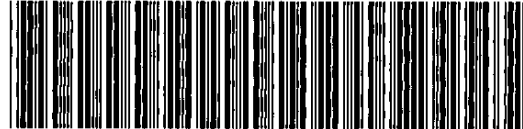
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

[Handwritten signature]

Office Use Only



500079564235

RECEIVED
06 SEP 18 PM 4:13
TALLAHASSEE, FLORIDA

FILED
06 SEP 18 AM 9:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 460494 11504A

AUTHORIZATION :

COST LIMIT : \$ 155.00

FILED
06 SEP 18 AM 9:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : September 18, 2006

ORDER TIME : 3:06 PM

ORDER NO. : 460494-005

CUSTOMER NO: 11504A

DOMESTIC FILING

NAME: DAVIE PRO RODEO, LLC

EFFECTIVE DATE:

____ ARTICLES OF INCORPORATION
____ CERTIFICATE OF LIMITED PARTNERSHIP
XX ____ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX ____ CERTIFIED COPY
____ PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Doreen Wallace - EXT. 2928

EXAMINER'S INITIALS: _____

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

DAVIE PRO RODEO, LLC

ARTICLE II - Address:

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

20701 Stirling Road, Pembroke Pines, FL 33332

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be perpetual.

ARTICLE IV - Management:

(check and complete the appropriate statement)

☒ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

Troy L. Weakley
20701 Stirling Road
Pembroke Pines, FL 33332

Daniel D. Weakley
20701 Stirling Road
Pembroke Pines, FL 33332

Wayne D. Weakley
20701 Stirling Road
Pembroke Pines, FL 33332

☐ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

ARTICLE V - Admission of Additional Members:

The right, if given, of the members to admit additional members and the terms and conditions of the admission shall be:

Additional members may be admitted into the company on such terms and conditions as may be unanimously agreed upon by the members.

ARTICLE VI - Members Rights to Continue Business:

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminated the continued membership of a member in the limited liability company shall be:

By unanimous vote of the remaining members within ninety (90) days after the occurrence

of an event that terminates a member's continued membership, the remaining members may continue the business.

ARTICLE VII - Effective Date:

The effective date of the limited liability company shall be September 18, 2006; provided that if such day be unauthorized by law, then on the next earliest day allowable pursuant to Florida law for the commencement of existence.

Date SEPT. 18, 2006


Signature of Member,
Troy L. Weekley

Date SEPT. 18, 2006


Signature of Member,
Daniel D. Weekley


Date 9/18/06


Signature of Member,
Wayne D. Weekley

STATE OF FLORIDA)
COUNTY OF FROWARD)

) SS:
)

The foregoing instrument was acknowledged before me this 18th day of September, 2006, by Troy L. Weekley, Daniel D. Weekley, and Wayne D. Weekley.


(Notary signature)

Notary Print Name: _____

Personally known _____

Or Produced Identification _____

Type of Identification Produced: _____



OSVALDO B. RIVERON
MY COMMISSION ID 350620
EXPIRES: September 11, 2008
Special Title: Budget Heavy Services

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/OFFICE**

**PURSUANT TO THE PROVISIONS OF SECTION 608.415 Or 608.507, FLORIDA STATUTES,
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING
STATEMENT IN DESIGNATING THE REGISTERED AGENT/REGISTERED OFFICE, IN THE
STATE OF FLORIDA.**

1. The name of the limited liability company is:

DAVIE PRO RODEO, LLC

2. The name and address of the registered agent and registered office are:

**WAYNE D. WEEKLEY
20701 Stirling Road, Pembroke Pines, FL 33332**

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 performance of my duties and I am familiar with and accept the obligations of my position as registered agent.


(SIGNATURE)


(DATE)