

LD6000107853

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

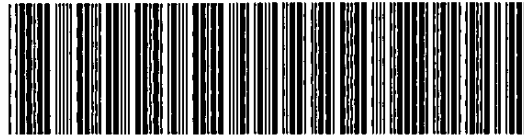
(Business Entity Name)

(Document Number)

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10/06/06--01011--021 **125.00

EFFECTIVE DATE

10/1/06

FILED
06 OCT -6 AM 11:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

ATX1

TO: Registration Section
Division of Corporations

SUBJECT: LAND BANKERS OF SOUTH FLORIDA, 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:

WILLIAM A ADAMS
(Name of Person)

ADAMS ACCOUNTING AND CONSULTING INC
(Firm/Company)

13100 PINE BOROUGH LANE
(Address)

PALM BEACH GARDENS, FLORIDA 33418
(City/State and Zip Code)

For further information concerning this matter, please call:

WILLIAM A ADAMS at (561) 626-9096
(Name of Person) (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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 9, 2006

WILLIAM A. ADAMS
13100 PINE BOROUGH LANE
PALM BEACH GARDENS, FL 33418

SUBJECT: LAND BANKERS OF SOUTH FLORIDA, LLC
Ref. Number: W06000044199

We have received your document for LAND BANKERS OF SOUTH FLORIDA, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Written approval and clearance of the words BANK, BANC, BANCO, BANQUE, BANKER, BANKING, TRUST COMPANY, SAVINGS AND LOAN ASSOCIATION, SAVINGS BANK or CREDIT UNION, or words of similar import in any context or any manner must be obtained from the Office of Financial Regulation, pursuant to section 655.922(2a), Florida Statutes.

Enclosed is a "Corporate Name Approval Request" form to be completed and sent to the address indicated on the form. If the proposed name is approved by the Office of Financial Regulation, resubmit the document and the approval letter to the Division of Corporations for filing.

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) 245-6067.

Neysa Culligan
Document Specialist

Letter Number: 206A00059882

LAND INVESTMENT GROUP LIMITED LIABILITY COMPANY
ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ATX1

ARTICLE I - Name:

The name of the Limited Liability Company is:

EFFECTIVE DATE

10/1/06

LAND INVESTMENT GROUP LIMITED LIABILITY COMPANY

(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:

Mailing Address:

LAND INVESTMENT GROUP
- LIMITED LIABILITY COMPANY
2564 NW 50TH AVENUE
OKEECHOBEE, FLORIDA 34972

LAND INVESTMENT GROUP
LIMITED LIABILITY COMPANY
2564 NW 50TH AVENUE
OKEECHOBEE, FLORIDA 34972

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:

WILLIAM J. TOMLINSON

Name

2564 NW 50TH AVENUE

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

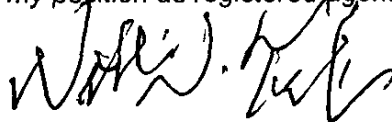
OKEECHOBEE

FL 34972

City, State, and Zip

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TALLAHASSEE, FLORIDA

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)

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:

MGRM

WILLIAM J. TOMLINSON

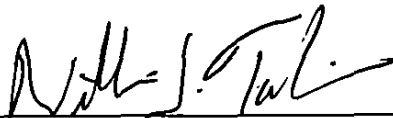
2564 NW 50TH AVENUE

OKEECHOBEE, FLORIDA 34972

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 10/1/2006 (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.)

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.)

WILLIAM J TOMLINSON

Typed or printed name of signer

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06 OCT -6 AM 11:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)