

LO7000016045

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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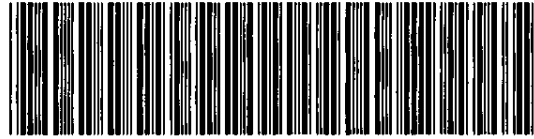
(Business Entity Name)

(Document Number)

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07 FEB 14 AM 10:52  
DEPT. OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
07 FEB 14 AM 11:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. O. FEB 14 2007



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February 14, 2007

**CORPORATION NAME (S) AND DOCUMENT NUMBER (S):**

Loxahatchee Equestrian Partners, LLC

**Filing Evidence**

☒ Plain/Confirmation Copy

☐ Certified Copy

**Retrieval Request**

☐ Photocopy

☐ Certified Copy

**Type of Document**

☐ Certificate of Status

☐ Certificate of Good Standing

☐ Articles Only

☐ All Charter Documents to Include  
 Articles & Amendments

☐ Fictitious Name Certificate

☐ Other

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non Profit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input checked="" type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of RA Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Reports
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation
<input type="checkbox"/>	Reinstatement

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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07 FEB 14 AM 11:06

ARTICLES OF CORRECTION  
FOR  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

**FIRST:** The name of the limited liability company is:  
LOXAHATCHEE EQUESTRIAN PARTNERS, LLC

**SECOND:** The articles of organization or the application to transact business

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)



Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

The numbers in the street address listed in Article II for the Principal Office and Mailing address

were transposed. The Corrected Article II shall read as follows: The street address of the principal

office of the Limited Liability Company is: 5730 Corporate Way, Suite 120, West Palm Beach, FL (US) 33407.

The mailing address of the limited liability company is: 5730 Corporate Way, Suite 120, West Palm Beach, FL 33407.

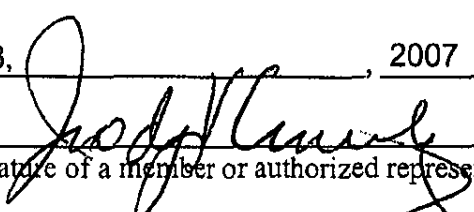
**OR**



Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated: February 13, 2007

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

Jody V. Crowley, Authorized representative

\_\_\_\_\_  
Typed or printed name of signee

Filing Fee: \$25.00  
Certified Copy: \$30.00 (optional)

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L07000016045  
FILED 8:00 AM  
February 12, 2007  
Sec. Of State  
Isellers

**Article I**

The name of the Limited Liability Company is:  
LOXAHATCHEE EQUESTRIAN PARTNERS, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
7530 CORPORATE WAY  
SUITE 120  
WEST PALM BEACH, FL. US 33407

The mailing address of the Limited Liability Company is:  
7530 CORPORATE WAY  
SUITE 120  
WEST PALM BEACH, FL. US 33407

**Article III**

The purpose for which this Limited Liability Company is organized is:  
ANY AND ALL LAWFUL BUSINESS.

**Article IV**

The name and Florida street address of the registered agent is:  
JENKINS APPRAISAL SERVICES, INC.  
5730 CORPORATE WAY  
SUITE 120  
WEST PALM BEACH, FL. 33407

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.

Registered Agent Signature: DIANE JENKINS, PRES., JENKINS APPRAISAL  
Signature of member or an authorized representative of a member  
Signature: PAUL NESPER, AUTHORIZED REPRESENTATIVE