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•
(Requestor's Name)
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, ,
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: JADEHA	ANNA RANCH LLC			
	(Name of Limited	l Liability Company)	
	Organization and fee(s) are so	-		
Please return all correspo	ondence concerning this matte	r to the following:		
Terence All	an Lacey-Freeman		20,000	
	Q	Name of Person)		
Jadehanna	Ranch LLC			728 23
	(Firm/Company)		三年
2300 Gunr	n Road			15 TS
		(Address)		mg P
Kissimmee	e, Florida 34746			
	(City	/State and Zip Code)		C.
For further information of	concerning this matter, please	call:		
Terence Lacey-F	reeman	at (407)	846 7042 Daytime Telephone N	
(Name	of Person)	(Area Code &	Daytime Telephone N	umber)
Enclosed is a check fo	r the following amount:			
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy Certificate of St (additional copy is enclosed) Certified Copy		
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Clifton Buil	Section Corporations ding tive Center Circle	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Jadehanna Ranch LLC (Must end with the words "Limited Liability Company, "Lin	mited 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:
3505 Harbor Road	2300 Gunn Road
Kissimmee	Kissimmee = 50
Florida 34746	Florida 34746
business entity with an active Florida registration.) The name and the Florida street address of the Kathleen Janice Lacey-Free Name	eeman De Gor Go
2300 Gunn Road	
Florida street	address (P.O. Box NOT acceptable)
Kissimmee, Florida, 34746	FL
City, Stat	e, and Zip
liability company at the place designated i registered agent and agree to act in this capa statutes relating to the proper and complete	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and egistered agent as provided for in Chapter 608, F.S

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

3-1-07

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

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

	MGRM	Terence Allan Lacey-Freeman 2300 Gunn Road	_ ,	
		Kissimmee, Florida 34746	-	
	MGR	Kathleen Janice Lacey-Freeman	- .	
		2300 Gunn Road	_	-
		Kissimmee, Florida 34746	- `	• • •
	The second secon	PRE TARREST OF THE PRESENT OF THE PR	AR-5 P	
	(Use attachment if necessary)	ب ۱۵ - این بلید این بلید		
n e	CLE V: Effective date, if other than the date ffective date is listed, the date must be so days after the date of filing.)	nte of filing: March 1st 2007 (OPTIC pecific and cannot be more than five business	NAL) days p	rior

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.)

Terence Allan Lacey-Freeman

Typed or printed name of signee

Fifing 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)