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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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03/05/07--01025--001 **125.00

COVER LETTER

Division of Corporations
SUBJECT: PLEASANT HILL RIDING CENTER 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:
Terence Allan Lacey-Freeman
(Name of Person)
Pleasant Hill Riding Center LLC Rame of Person) ALCR ARE A
(Firm/Company) SSRY
2300 Gunn Road
(Address) STA ?:
Kissimmee, Florida 34746
(City/State and Zip Code)
For further information concerning this matter, please call:
Terence Lacey-Freeman at (407) 846 7042
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status} \text{S155.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liability Company is	3:			
Pleasant Hill Riding Center LLC (Must end with the words "Limited Liability Company, "Lim	ited Company" or their abbreviation "LI.	.C," or "L.	C.,")	
(--	,		
ARTICLE II - Address:		v + 4 +14.	~	
The mailing address and street address of the p	principal office of the Limited	Liability	/ Comp	pany is:
Principal Office Address:	Mailing Address:			
3505 Harbor Road	2300 Gunn Road			
Kissimmee	Kissimmee			
Florida 34746	Florida 34746			
Kissimmee, Florida 34746 City, State	eman ddress (P.O. Box <u>NOT</u> acceptable) FL and Zip	SECRETARY OF STATE TALLAHASSEE. FLORIDA	2001 MAR -5 1> 2: 11	FILED
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete p accept the obligations of my position as reg	n this certificate, I hereby accept hity. I further agree to comply w performance of my duties, and I	t the app oith the p am fam	ointme rovisio iliar wi	ent as ons of all ith and
Registered Agent's Sign	Freemer nature (REQUIRED)			

(CONTINUED)
Page 1 of 2

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

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

'MGRM" = Managing Member		
MGRM	Terence Allan Lacey-Freeman	
	2300 Gunn Road	
	Kissimmee, Florida 34746	
MGR	Kathleen Janice Lacey-Freeman	
	2300 Gunn Road	-
	Kissimmee, Florida 34746	
MGR	Caroline Janice Lacey-Freeman	2001 SEC
	2310 Gunn Road	PR X
	Kissimmee, Florida 34746	SA
MGR	Dean Lacey-Freeman	5 P
	2310 Gunn Road	<u> </u>
	Kissimmee, Florda 34746	SA
(Use attachment if necessary)		DE -
TO NA. ESCANTINA data is alboration a	hadata a C.C.III.m., March 1et 2007	(OPTI)
LE V: Effective date, if other than t		OPTIC
days after the date of filing.)	be specific and cannot be more that	n nve dusiness
uays after the date of fining.)		

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

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)