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#### FLORIDA/FOREIGN LIMITED LIABILITY CO.

Cheyenne Stables of Florida, LLC

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Electronic Filing Menu

Corporate Filing Menu

Help

#### FAX AUDIT # H07000 13 2887 3

## ARTICLES OF ORGANIZATION OF

Cheyenne Stables of Florida, LLC

ARTICLE I

NAME

The name of the limited liability company shall be: Cheyenne Stables of Florida, LLC

ARTICLE II

PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 11790 NW 8th St., Plantation, Florida 33325.

ARTICLE IU

INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Marion E. Schano, 11790 NW 8TH ST., Plantation, Florida 33325. Located in the County of Broward.

ARTICLE IV

**DURATION** 

The duration for the limited liability company shall be: 12/31/2047.

ARTICLE V

MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the names and addresses of the members of the Limited Liability Company are:

Nicole E. Schano, 11790 NW 8th St., Plantation, Florida 33325 Marion E. Schano, 11790 NW 8th St., Plantation, Florida 33325 Edward S. Schano, 11790 NW 8th St., Plantation, Florida 33325

T. Com

Business Filings Incorporated, Organizer Terese Coulthard, Asst. Sec.

Authorized Representative

Prepared by Terese Coulthard, Business Filings Incorporated, 8025 Excelsior Dr., Suite 200, Madison, WI 53717

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# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: Cheyenne Stables of Florida, LLC

The name and address of the registered agent and office is Marion E. Schano, 11790 NW; 8TH ST., Plantation, Florida 33325. Located in the County of Broward.

Having been named as registered agent and to accept service of process for the above stated 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.

Signature: Marion Z. Schar

Marion F. Schano

Date

FAX AUDIT # #07000132887 3