L07000076295

(Requestor's Name)		
(Address)		
(Ac	ldress)	
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
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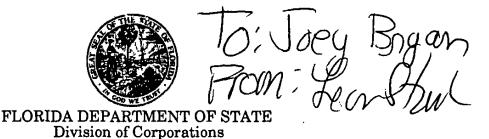


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DIVISION OF CORPORATIONS

W07-33555



July 13, 2007

LEON STURK LEON STURK, LLC 1200 NORTH CENTRAL AVENUE, SUITE 215 KISSIMMEE, FL 34741

SUBJECT: LEON STURK, LLC Ref. Number: W07000033555

I signedall the paperwark, Sorry

We have received your document for LEON STURK, 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):

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on July 12, 2007. Please amend your document accordingly.

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) 245-6043.

Joey Bryan Document Specialist

Letter Number: 507A00044657

DIVISION OF CORPORATIONS

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:		
LEON STURK, LLC		
(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 Con	mpany is:	
·		

ARTICLE I - Name:

Principal Office Address:	Mailing Address:
1200 NORTH CENTRAL AVENUE, SUITE 215	SAME
KISSIMMEE, FLORIDA 34741	24 CORE
	Post of the second seco
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)	
The name and the Florida street address of the	tush
1200 M. (Contral Avenue Suite 215
VISO MM (Idress (P.O. Box NOT acceptable) (V) Start Star
City, State,	and Zip

9

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..

(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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

MGR

LEON STURK

1549 SHERBROOK DRIVE

CLERMONT, FLORIDA 34711

MGRM

Acres Sturk

Clermont, Florida 34711

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Roles Sturk

Clermont, Florida 34711

MGRM

Acres Sturk

Clermont, Florida 34711

Clermont, Florida 34711

Clermont, Florida 34711

Acres Sturk

Clermont, Florida 34711

Clermont, Florida 34711

Acres Sturk

Clermont, Florida 34711

REQUIRED SIGNATURE:

to or 90 days after the date of filing.)

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.)

LEON STURK

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)