

LO7000090543

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

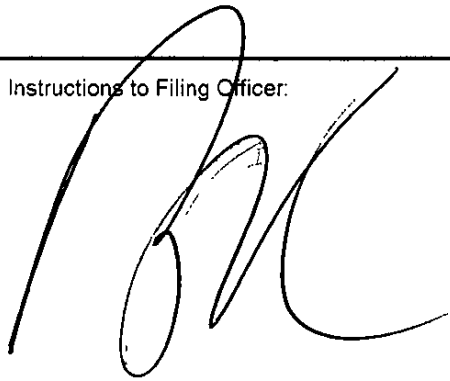
PICK-UP  WAIT  MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:



Office Use Only

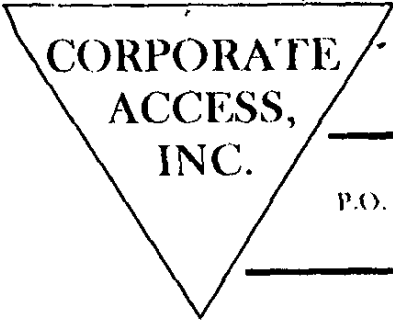


600108810396

09/05/07--01010--009 \*\*155.00

RECEIVED  
07 SEP -5 AM 10:21  
REGISTRATION DIVISION  
TALLAHASSEE, FLORIDA

FILED  
07 SEP -5 PM 1:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



"When you need ACCESS to the world"

236 East 6th Avenue . Tallahassee, Florida 32303  
P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

WALK IN

PICK UP: 9/5/07

**FILED**  
07 SEP -5 PM 1:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

- CERTIFIED COPY \_\_\_\_\_
- PHOTOCOPY \_\_\_\_\_
- CUS \_\_\_\_\_
- FILING LLC

1. Betty H. Shinn, LLC  
(CORPORATE NAME AND DOCUMENT #)
2. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
3. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
4. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
5. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
6. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLES OF ORGANIZATION OF BETTY H. SHINN, LLC**

The undersigned, being authorized to execute and file these Articles of Organization, hereby certifies that:

**ARTICLE I — Name:**

The name of the limited liability company (hereinafter referred to as the "Company") is "BETTY H. SHINN, LLC."

**ARTICLE II — Address:**

The mailing address and street address of the principal office of the Company is:

Mailing Address 140 North Penn Avenue  
Lake Alfred, FL 33850

Street Address: 140 North Penn Avenue  
Lake Alfred, FL 33850

**ARTICLE III — Registered Agent and Registered Office**


The name and the Florida street address of the initial registered agent are:

Betty H. Shinn  
140 North Penn Avenue  
Lake Alfred, FL 33850

**ARTICLE IV — Limitation on Agency Authority of Members:**

Pursuant to Section 608.4235 of the Florida Limited Company Act, no member of the Company shall be an agent of the Company solely by virtue of being a member.

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this 4<sup>th</sup> day of September, 2007.

  
\_\_\_\_\_  
Signature of authorized representative  
BETTY H. SHINN  
\_\_\_\_\_  
Typed or printed name of signee

(In accordance with Section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

**FILED**  
07 SEP - 5 PM 1:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT**

I hereby accept the designation as registered agent to accept service of process for the above stated limited liability company at the place designated in this statement. 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 under Chapter 608, Florida Statutes.

(In accordance with Section 608.408(3), Florida Statutes, the execution of this statement constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)



Signature of Registered Agent

BETTY H. SHINN

Typed or printed name of signee