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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

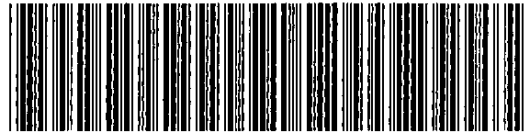
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Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



PAUL STANLEY WEST, P.A.
ATTORNEYS AT LAW

600 S. Orlando Ave., Suite 301, Maitland, Florida 32751

Paul S. West, Esq.
Phone: (407) 678-9111
Fax: (407) 679-9911
pswest@PaulWestLaw.com

September 5, 2007

Department of State
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Re: KEENE'S PHEASANT, LLC
Corporate Filing

To Whom It May Concern:

Please find enclosed the original "*Articles of Organization*" for the above referenced KEENE'S PHEASANT, LLC. I am also enclosing a total of \$160.00 for the following: a) the requisite filing fee; b) registered agent fee; c) a certified copy of the "*Articles of Organization*"; and d) a "Certificate of Status".

Please return the certified copy of the "*Articles of Organization*"; and the "Certificate of Status" to us at the following address:

Paul Stanley West, P.A.
600 S. Orlando Ave., Suite 301
Maitland, FL 32751

If you need anything further, please don't hesitate to contact our office.
Thanks for your help in the filing of this new Limited Liability Company.

Sincerely,

Paul S. West
Attorney At Law

PSW/law

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Articles of Organization of KEENE'S PHEASANT, LLC

ARTICLE I – Name

The name of the Limited Liability Company is:
KEENE'S PHEASANT, LLC

ARTICLE II – Address

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

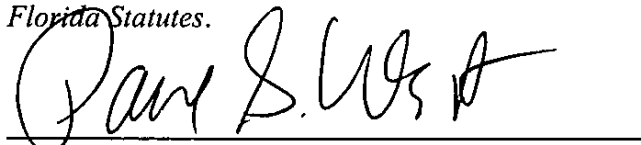
13427 FOSSICK ROAD
WINDERMERE, FL 34786

ARTICLE III – Registered Agent, Registered Office, and Registered Agent's Signature

The name and the Florida street address of the Registered Agent of this Limited Liability Company is:

PAUL S. WEST, Esquire
600 S. ORLANDO AVE., SUITE 301
MAITLAND, FL 32751

Having been named as registered agent and to accept service of process for the 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, Florida Statutes.



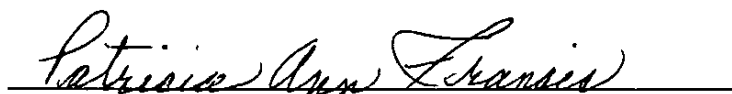
PAUL S. WEST, Registered Agent

ARTICLE IV – Management

The Limited Liability Company is to be managed by the following individual named hereinbelow:

PATRICIA ANN FRANCIS, Managing Member
13427 FOSSICK ROAD
WINDERMERE, FL 34786

Dated this 9-4-07, 2007


PATRICIA ANN FRANCIS, Managing Member

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