

LO 7000100691

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

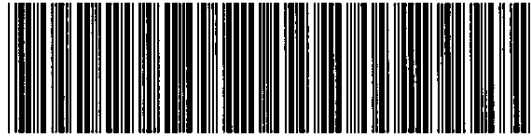
(Document Number)

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

Special Instructions to Filing Officer:

*[Handwritten Signature]*

Office Use Only



200109739132

10/03/07--01013--005 \*\*465.00

RECEIVED  
07 OCT -3 AM 11:27  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
07 OCT -3 PM 2:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

**FILED**  
07 OCT -3 PM 2:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Keyser II, LLC

- ☐ Art of Inc. File
- ☐ LTD Partnership File
- ☐ Foreign Corp. File
- ☒ L.C. File
- ☐ Fictitious Name File
- ☐ Trade/Service Mark
- ☐ Merger File
- ☐ Art. of Amend. File
- ☐ RA Resignation
- ☐ Dissolution / Withdrawal
- ☐ Annual Report / Reinstatement
- ☒ Cert. Copy
- ☐ Photo Copy
- ☐ Certificate of Good Standing
- ☐ Certificate of Status
- ☐ Certificate of Fictitious Name
- ☐ Corp Record Search
- ☐ Officer Search
- ☐ Fictitious Search
- ☐ Fictitious Owner Search
- ☐ Vehicle Search
- ☐ Driving Record
- ☐ UCC 1 or 3 File
- ☐ UCC 11 Search
- ☐ UCC 11 Retrieval

Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up

Courier

**ARTICLES OF ORGANIZATION FOR  
KEYSER II, LLC  
A FLORIDA LIMITED LIABILITY COMPANY**

**FILED**  
07 OCT - 3 PM 2:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I - NAME**

The name of the Limited Liability Company is: **KEYSER II, LLC**

**ARTICLE II - ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is: **2017 Shoreland Drive, Auburndale, Florida 33823**

**ARTICLE III - DURATION**

The period of duration for the Limited Liability Company shall be: **Until dissolved pursuant to its Operating Agreement.**

**ARTICLE IV - MANAGEMENT**

The Limited Liability Company is to be managed by the members. The names and addresses of the managing members are:

Charles R. Keyser  
2017 Shoreland Drive  
Auburndale, Florida 33823

Terryl B. Keyser  
2017 Shoreland Drive  
Auburndale, Florida 33823

**ARTICLE V - ADMISSION OF ADDITIONAL MEMBERS**

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be: **Additional members may be admitted only as unanimously agreed upon by the Members as set forth in the Operating Agreement.**

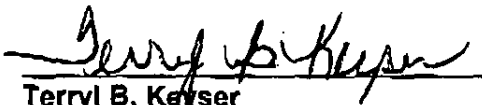
**ARTICLE VI - MEMBERS RIGHTS TO CONTINUE BUSINESS**

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be: **Only with the consent of all the remaining Members.**

IN WITNESS WHEREOF, these Articles of Organization have been signed, as Managing Members, by: **Charles R. Keyser and Terryl B. Keyser.**

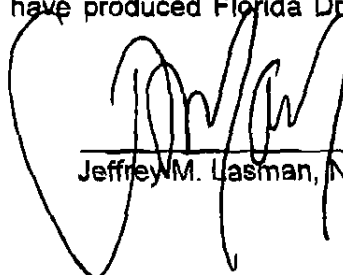
Dated this 15<sup>th</sup> day of September, 2007

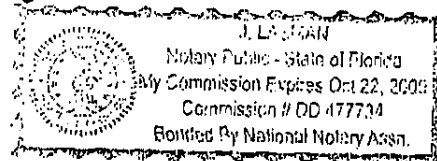
  
Charles R. Keyser  
Managing Member

  
Terryl B. Keyser  
Managing Member

STATE OF FLORIDA  
COUNTY OF HILLSBOROUGH

The foregoing instrument was acknowledged before me this 15<sup>th</sup> day of September, 2007,  
by **Charles R. Keyser** and **Terryl B. Keyser**, who have produced Florida Driver Licenses as  
identification.

  
\_\_\_\_\_  
Jeffrey M. Lasman, Notary Public



**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: **KEYSER II, LLC**
2. The name and address of the registered agent and office is:

**Jeffrey M. Lasman, Esquire  
LASMAN LAW FIRM, P.A.  
6152 Delancey Station Street  
Suite 205  
Riverview, Florida 33569**

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.

  
\_\_\_\_\_  
Jeffrey M. Lasman

September 15, 2007  
(Date)