

L080000001331

(Requestor's Name)

L. Sellers Inc.
P.O. Box 788
Tallahassee, FL 32305-0788

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

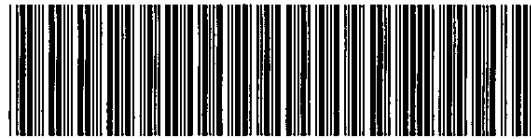
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Office Use Only

L. SELLERS

JAN 4 2008

EXAMINER



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09/17/07--01019--008 **125.00

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2008 JAN -3 PM 2:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Spring River Limited Liability Company
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Marlene Lyn - Cook

(Name of Person)

Spring River Limited Liability Company

(Firm/Company)

7257 NW 4th Boulevard, Suite 261

(Address)

Gainesville, FL 32607

(City/State and Zip Code)

For further information concerning this matter, please call:

Marlene Lyn Cook

(Name of Person)

at (352) 283-6476

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

*Paid
4/07*

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 18, 2007

L-COOK INVESTMENTS, LLC
P.O. BOX 733
ALACHUA, FL 32616-0733

SUBJECT: SPRING RIVER LIMITED LIABILITY COMPANY
Ref. Number: W07000046055

We have received your document for SPRING RIVER LIMITED LIABILITY COMPANY and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law does not provide for the Secretary of State to serve as your registered agent. Please revise your document accordingly.

A post office box is not an acceptable address for the registered agent.

Please list the complete principal's office address.

The document must contain the entity's complete mailing address.

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

This office does not file name reservations. The entity name is reserved for use when the articles of organization are filed. Operating Agreements are not filed in this office and must be retained in your own personal records.,

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) 245-6967.

Leslie Sellers
Document Specialist

Letter Number: 707A00054921

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Spring River Limited Liability Company
(Must end with the words "Limited Liability Company, "LLC.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

2835 SW 91st Street
Suite #300
Gainesville, FL 32607

Mailing Address:

7257 NW 4th Boulevard
Suite #261
Gainesville, FL 32607

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Marlene Lyn-Cook
Name

2835 SW 91st Street #300
Florida street address (P.O. Box **NOT** acceptable)
Gainesville FL 32606.
City, State, and Zip

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..

Marlene Lyn-Cook
Registered Agent's Signature (REQUIRED)

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

Name and Address:

MGRM

Marlene Lyn-Cook

7257 NW 4th Boulevard, Ste 261
Gainesville, FL 32607

MGR

David Paul

P.O. Box 733

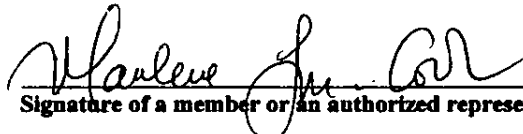
Alachua, FL 32616

(Use attachment if necessary)

* **ARTICLE V:** Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



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.)

Marlene Lyn-Cook

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)

Page 2 of 2

* If possible, date of 1st filing - receipt & check.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 JAN -3 PM 2:50

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