L08000008043

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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W07-59796

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Effective Date 107

DIVISION OF CORPORATIONS

B. Tadlock JAN 23 2008

COVER LETTER

то:	Registration Section Division of Corporations	
SHRII	SAC FL LLC	
301301		ited Liability Company)
The en	closed Articles of Organization and foc(s) are	a submitted for filing
	closed Articles of Organization and fee(s) are	-
Please	return all correspondence concerning this ma	itter to the following:
	Sheila Chapman	
		(Name of Person)
	SAC FL LLC	
		(Firm/Company)
	77 Reflection Drive	
		(Address)
	Sandwich, MA 02563	
	(C	ity/State and Zip Code)
For fur	ther information concerning this matter, pleas	se call:
Shei	la Chapman	at (781) 953-2766
	(Name of Person)	(Area Code & Daytime Telephone Number)
Enclos	ed is a check for the following amount:	
▼ \$125.	00 Filing Fee \$\sum \$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)
	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

December 10, 2007

SHEILA CHAPMAN SAC FL LLC 77 REFLECTION DR. SANDWICH, MA 02563

SUBJECT: SAC FL LLC

Ref. Number: W07000059796

We have received your document for SAC FL 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

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) 245-6911.

Brenda Tadlock Senior Section Administrator

Letter Number: 707A00069342

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Division of Comparations D.O. ROV 6297 Tollahosson Florida 2921



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 24, 2007

SHEILA CHAPMAN SAC FL LLC 77 REFLECTION DR. SANDWICH, MA 02563

SUBJECT: SAC, LLC

Ref. Number: L05000045843

We have received your document for SAC, 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):

As stated in my letter dated December 10, 2007, adding the words "OF FLORIDA" is not acceptable. Please revise the name of your limited liability company 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) 245-6911.

Letter Number: 607A00071447

Brenda Tadlock Senior Section Administrator

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

SAC FL LLC	Must end with the words "Limited Liab	SHEILA A Chapman 63 ELOVEIDA EEC ility Company, "L.L.C.," or "LLC.")	_
ARTICLE II - A The mailing addr		principal office of the Limited Liabilit	ty Company is:
Principal Office	Address:	Mailing Address:	
409 N Country Club E	Drive	77 Reflection Drive	
Atlantis, FL 33462		Sandwich, MA 02563	
business entity with a	n active Florida registration.) Florida street address of the Sheila Chapman	registered agent are:	OT SIVIGE
	Name		R SEC
	400 N. Country Club	Drivo	-6 -6
	409 N Country Club	DIIVE	
	409 N Country Club Florida street ac	ddress (P.O. Box NOT acceptable)	
			PM 1:
	Florida street ac	idress (P.O. Box <u>NOT</u> acceptable) FL	PM 1: 03

ristered agent and agree to act in this capacity. I further agree to comply with the provisions of a tatutes 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..

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:

<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGR	Sheila Chapman
	77 Reflection Drive
	Sandwich, MA 02563
	Florida address is:
	409 N Country Club Drive
	Atlantis, FL 33462
	
(Use attachment if necessary)	
•	
LE V: Effective date, if other than	the date of filing: 12/1/07 . (OPTI
	t be specific and cannot be more than five busines
HECHYE HATE IS HSTEH, THE HATE HIHS	t by specific with common so more than in a succines
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.)

Sheila Chapman

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)

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