## L08000012622

| (Re                     | equestor's Name)  |             |
|-------------------------|-------------------|-------------|
| (Ad                     | Idress)           |             |
| (Ad                     | ldress)           |             |
| . (Cit                  | ty/State/Zip/Phon | e #)        |
| PICK-UP                 | ☐ WAIT            | MAIL.       |
| . (Bu                   | siness Entity Nar | ne)         |
| (Do                     | cument Number)    | 1           |
| Certified Copies        | _ Certificates    | s of Status |
| Special Instructions to | Filing Officer:   |             |
|                         |                   |             |
|                         |                   |             |
|                         |                   |             |
|                         |                   |             |

Office Use Only



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. See Section !

02/04/08--01009--022 \*\*160.00

08 FEB -4 AM 8: 54

SECRETARY OF STATE DIVISION OF CORPORATION

J. BRYAN

FEB - 5 2008

**EXAMINER** 

## **COVER LETTER**

| TO:               | Registration S<br>Division of Co |   |  |  |               |              |
|-------------------|----------------------------------|---|--|--|---------------|--------------|
| SUBJ              | ECT: Lighth                      | ouse Bay Enterpri   | ses, LLC.  |  |               |              |
|                   |                                  | (Name of Limit  | ed Liability Company)  |  |               |              |
| The en            | sclosed Articles o               | f Organization and fee(s) are   | submitted for filing.  |  |               |              |
| Please            | return all corresp               | ondence concerning this mat   | ter to the following:  |  |               |              |
|                   | Allen Simp                       | oson .  |  |  |               |              |
|                   |                                  |   | (Name of Person)   |  |               |              |
|                   | Lighthous                        | e Bay Enterprises   | , LLC.   |  |               |              |
|                   |                                  | <u> </u>  | (Firm/Company)   |  |               | 9            |
|                   | 3622 Tige                        | reye Court  |  |  | 08 FE!        | ASSOR        |
|                   | <del></del>                      |   | (Address)  |  | <u>ا</u><br>ا | OF C         |
|                   | Mulberry,                        | Florida 33860   |  |  | =             | CORPORATIONS |
|                   |                                  | (Ci   | y/State and Zip Code)  |  | 8: 54         | )<br>A       |
| For fur           | ther information                 | concerning this matter, pleas   | e call:  |  | 54            | ONS          |
| Allei             | n Simpson                        |   | at ( 863 ) 398-4697  | 7  |               |              |
| <del>-11.11</del> | (Name                            | of Person)  | (Area Code & Daytime Tele  | phone Number)  |               |              |
| Enclos            | sed is a check fo                | or the following amount:  |  |  |               |              |
| <b>\$</b> 125.    | .00 Filing Fee                   | \$130.00 Filing Fee & Certificate of Status   | □\$155.00 Filing Fee & ✓<br>Certified Copy<br>(additional copy is enclosed)                                    | \$160.00 Filing Fe<br>Certificate of State<br>Certified Copy<br>(additional copy is en | us &          |              |
|                   |                                  | 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 Ci | ircle  |               |              |

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| Lighthouse Bay En  | terprises, LLC.   |  |                   |
|--|---|--|-------------------|
| <del> </del>   | th the words "Limited Liability C   | ompany, "L.L.C.," or "LLC.")   |                   |
| ARTICLE II - Address:  |   |  |                   |
| The mailing address and s  | treet address of the princi   | pal office of the Limited Liab   | oility Company    |
| Principal Office Address   | <u>:</u> <u>M</u>   | ailing Address:  |                   |
| 3622 Tigereye Court  | 36  | 22 Tigereye Court  |                   |
| Mulberry, Florida 33860  |   | ulberry, Florida 33860   | <del></del>       |
|  | ed Agent, Registered Of   | fice, & Registered Agent's S   |                   |
| The Limited Liability Company c<br>business entity with an active Flo                                      | ed Agent, Registered Of annot serve as its own Registered rida registration.)   | fice, & Registered Agent's S<br>Agent. You must designate an individu  | al or another     |
| The Limited Liability Company of business entity with an active Flo  | ed Agent, Registered Of annot serve as its own Registered rida registration.)   | fice, & Registered Agent's S<br>Agent. You must designate an individu  | ual or another    |
| The Limited Liability Company of business entity with an active Flo  | ed Agent, Registered Of annot serve as its own Registered rida registration.) street address of the regis                                   | fice, & Registered Agent's S<br>Agent. You must designate an individu  | DIVISION OF CO    |
| The Limited Liability Company of business entity with an active Flo The name and the Florida Rosa          | ed Agent, Registered Of annot serve as its own Registered rida registration.) street address of the regis a Barreto  Name                   | fice, & Registered Agent's S<br>Agent. You must designate an individu  | INVISION OF CORPO |
| The Limited Liability Company of business entity with an active Flo The name and the Florida Rosa          | ed Agent, Registered Of annot serve as its own Registered rida registration.) street address of the regis a Barreto  Name  2 Tigereye Court | fice, & Registered Agent's S<br>Agent. You must designate an individu  | INVISION OF CORPO |
| (The Limited Liability Company of business entity with an active Flot The name and the Florida  Rosa  3622 | ed Agent, Registered Of annot serve as its own Registered rida registration.) street address of the regis a Barreto  Name  2 Tigereye Court | Fice, & Registered Agent's S Agent. You must designate an individu tered agent are:  (P.O. Box NOT acceptable) | DIVISION OF CO    |

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.

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> "MGR" = Manager  | Name and Address:   |             |
|--------------------------------|---|-------------|
| "MGRM" = Managing Mer          | nber  |             |
| MGR                            | Allen Simpson   |             |
|                                | 3622 Tigereye Court   |             |
|                                | Mulberry, Florida 33860   |             |
|                                |   | <u></u>     |
|                                | <del> </del>  |             |
|                                |   | 8<br>8      |
| <del></del>                    |   | — 8<br>     |
|                                |   |             |
|                                |   | <del></del> |
|                                |   | &           |
|                                |   |             |
| (Use attachment if necessar    | y)  |             |
| TEV: Effective data if oth     | or than the data of filing:   | DTIONA      |
| fective date is listed, the da | er than the date of filing: (Olite must be specific and cannot be more than five busi | ness davs   |
| days after the date of filing  |   |             |
|                                |   |             |
| <u>REQUIRED</u> SIGNATUR       | E:  |             |
|                                | 1 -   |             |
|                                | Clan Simpson  |             |

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

Sympson

Typed or printed name of signee