

L08 000020111

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

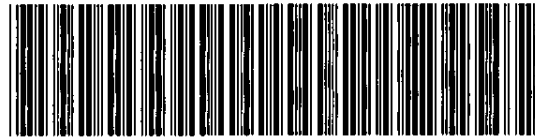
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



100116655501

02/26/08--01018--010 \*\*155.00

**FILED**

08 FEB 26 PM 1:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**RECEIVED**

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

2008 FEB 26 AM 11:55

NOT RETURNED  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

**B. KOHR**

FEB 26 2008

**EXAMINER**

# CAPITAL CONNECTION, INC.

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

*Sure Bet Farms, LLC*

*Stamp Filed  
extra copy  
p/s*

Signature \_\_\_\_\_

Requested by: *WC*

Name

Date *2/25*

Time *4:00*

Walk-In \_\_\_\_\_

Will Pick Up \_\_\_\_\_

**FILED**  
08 FEB 26 PM 1:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

\_\_\_\_ 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 \_\_\_\_\_  
\_\_\_\_ Courier \_\_\_\_\_

**ARTICLES OF ORGANIZATION OF SURE BET FARMS,  
LLC, A FLORIDA LIMITED LIABILITY COMPANY**

**THE UNDERSIGNED, BEING AUTHORIZED TO EXECUTE  
AND FILE THESE ARTICLES OF ORGANIZATION, HEREBY  
CERTIFIES THAT:**

**ARTICLE I – Name:**

The name of the Limited Liability Company is SURE BET FARMS,  
LLC (hereinafter referred to as the “Company”).

**ARTICLE II – Address:**

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

**198 Rabbit Hollow, Masaryktown, Florida 34604**

**ARTICLE III – Duration:**

The period of duration for the Limited Liability Company shall be  
Perpetual, unless earlier terminated in accordance with the operating  
agreement.

**ARTICLE IV – Management:**

The Company is to be managed by a Manager and the name and  
address of the Manager is:

Robert Vernon  
198 Rabbit Hollow  
Masaryktown, Florida 34604

**ARTICLE V Limitation on Agency Authority of Members:**

Pursuant to Section 608.4235 of the Florida Limited Liability  
Company Act, no member of the Company shall be an agent of the Company  
solely by virtue of being a member, and no member shall have authority to  
incur debt or contractual liability on behalf of the Company solely by virtue of  
being a member.


**FILED**  
09 FEB 26 PM 1:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VI- Registered Agent, Registered Office, &  
Registered Agent's Signature:**

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

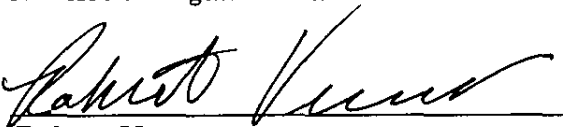
Lawrence J. Marchbanks, Esquire  
110 Cleveland Avenue  
Wildwood, Florida 34785

*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.*

  
LAWRENCE J. MARCHBANKS  
Registered Agent

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this 25<sup>th</sup> day of February, 2008.


Member authorized to Execute  
Articles of Organization

  
BY: Robert Vernon

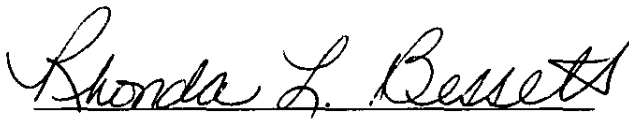
(In accordance with Section 608.403(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

**STATE OF FLORIDA  
COUNTY OF SUMTER**

The foregoing Articles of Organization were acknowledged before me on the 21 day of FEBRUARY 2008, by Robert Vernon who produced A Florida Drivers License as identification or is personally known to me.

NOTARY PUBLIC-STATE OF FLORIDA  
 Rhonda Lee Bessett  
Commission # DC163033  
Expires: AUG. 17, 2009  
Bonded Thru Atlantic Bonding Co., Inc.

(Notary Seal)

  
Notary Public – State of Florida  
EXPIRES AUG. 17, 2009