

LO80VDD28815

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

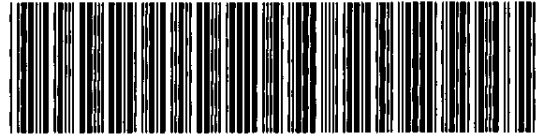
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



900120731379

03/20/08--01019--010 \*\*125.00

RECEIVED  
08 MAR 20 AM 10:52  
FLORIDA SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
08 MAR 20 PM 2:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. KOHR

MAR 20 2008

EXAMINER



UCC FILING & SEARCH SERVICES, INC.  
 1574 Village Square Blvd Ste 100  
 Tallahassee, Florida 32309  
 (850) 681-6528

**HOLD**  
 FOR PICKUP BY  
 UCC SERVICES  
 OFFICE USE ONLY

March 20, 2008

**CORPORATION NAME (S) AND DOCUMENT NUMBER (S)**

Bud Meadows Properties, LLC

**Filing Evidence**

☒ Plain/Confirmation Copy

☐ Certified Copy

**Retrieval Request**

☐ Photocopy

☐ Certified Copy

**Type of Document**

☐ Certificate of Status

☐ Certificate of Good Standing

☐ Articles Only

☐ All Charter Documents to Include  
 Articles & Amendments

☐ Fictitious Name Certificate

☐ Other

NEW FILINGS	
	Profit
	Non Profit
X	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of RA Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS	
	Annual Reports
	Fictitious Name
	Name Reservation
	Reinstatement

REGISTRATION/QUALIFICATION	
	Foreign
	Limited Liability
	Reinstatement
	Trademark
	Other

**FILED**  
 08 MAR 20 PM 2:26  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**FILED**  
08 MAR 20 PM 2:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

**BUD MEADOWS PROPERTIES, LLC**

**ARTICLE II - Address:**

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

**Principal Office Address:**

112 Locust Run  
Ocala FL 34472

**Mailing Address:**

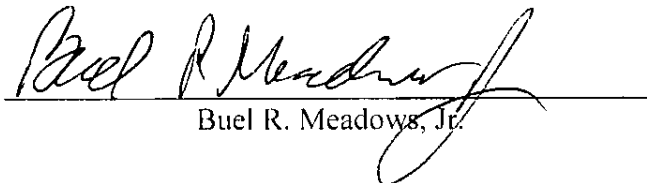
112 Locust Run  
Ocala FL 34472

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

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

Buel R. Meadows, Jr.  
112 Locust Run  
Ocala FL 34472

*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, Florida Statutes.*

  
Buel R. Meadows, Jr.

**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of the Manager is as follows:

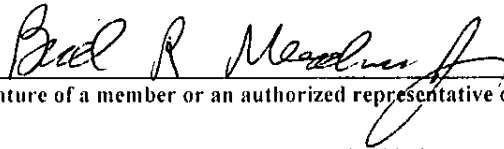
**Title:**

**Name and Address:**

"MGR"

Buel R. Meadows, Jr.  
112 Locust Run  
Ocala FL 34472

**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.)

\_\_\_\_\_  
Buel R. Meadows, Jr.

Typed or printed name of signee