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(Requestor's Name)				
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PICK-UP WAIT MAIL				
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SECRETARY OF STATE

N. Gulligen APK 29 2000

COVER LETTER

	ation Section of Corporations		
SUBJECT: GA	RRISON PROPERTY MANAG	EMENT & REAL	ESTATE, LLC
	(Name of Limit	ted Liability Comp	any)
The enclosed Arti	icles of Organization and fee(s) are	submitted for filin	g.
Please return all o	correspondence concerning this mat	ter to the following	g:
Mr. Jo€	e Garrison		
•		(Name of Person)	
Garriso	on Property Managemer	nt & Real Est	ate, LLC
		(Firm/Company)	
P. O. E	3ox 510		
		(Address)	
Dunde	e, Florida 33838		
	(Ci	ty/State and Zip Cod	c)
For further inform	nation concerning this matter, pleas	e call:	
Joe Garrison		at (_863	667-0419
	(Name of Person)	(Area Co	de & Daytime Telephone Number)
Enclosed is a ch	neck for the following amount:		
✓ \$125.00 Filing	Fee \$\int_\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Certified Contact (additional contact)	ppy Certificate of Status &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registra Division Clifton l 2661 Ex	Courier Address tion Section of Corporations Building recutive Center Circle usee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liability Com	pany is:			
GARRISON PROPERTY MANA	GEMENT & REAL ESTATE	, LLC		
(Must end with the words "Lim	ited Liability Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address	of the principal office of the Limite	ed Liability Company is:		
Principal Office Address:	Mailing Address:			
28609 Highway 27, N.	P. O. Box 510			
Dundee, Florida 33838	Dundee, Florida 33838			
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its business entity with an active Florida registration.)				
The name and the Florida street address	08 APR 28 SECRETAR TALLAHAS			
Joe Garrison		APP PR		
	TAR ASS			
28609 Highway 2	SEE P			

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..

Florida street address (P.O. Box NOT acceptable)

Registered Agent's Signature (REQUIRED)

City, State, and Zip

Dundee, Florida 33838

(CONTINUED)
Page 1 of 2

. . . ,

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	
MGRM	Joe Garrison
	28609 Highway 27, N.
	Dundee, Florida 33838
MGRM	Daphne Garrison
	28609 Highway 27, N.
	Dundee, Florida 33838
MGRM	Edward Beffa
MOLIAN	2637 Canterbury Circle
	Lakeland, Florida 33810
(Use attachment if necessary)	
,	
ARTICLE V: Effective date, if other than the	
	e specific and cannot be more than five business days prior
to or 90 days after the date of filing.)	
	4. , 0
REQUIRED SIGNATURE:	EE B
	LAHE PR
	HASSE T
_doesta	$\frac{S}{S}$
Signature of a membe	er or an authorized representative of a member. Station 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury
(In accordance with sec	ction 608.408(3), Florida Statutes, the execution
of this document consti that the facts stated h	ection 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury recein are true.)
Joe carrison	
~ · · · · · · · · · · · · · · · · · · ·	ped 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)