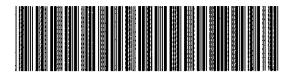
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(Req	uestor's Name)	
(Add	ress)	
(Addi	ress)	
(City)	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nar	me)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	

Office Use Only



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B. KOHR 0CT 13 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

The Larrand Corporation

PALLAMASSEE, PLORIDA

				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	
Signature				Fictitious Owner Search Vehicle Search	
Requested by:	10/3	// <u>'</u> co		UCC 1 or 3 File	
Name	Date	Time		UCC 11 SearchUCC 11 Retrieval	-
Walk-In	Will Pick Up		{	Courier	

Law Offices of L. J. Arnold, III Attorney at Law

718 N. ORANGE AVENUE POST OFFICE BOX 1570 GREEN COVE SPRINGS, FLORIDA 32043-1570

October 7, 2008

TELEPHONE:
GREEN COVE SPRINGS
(904) 284-5618
ORANGE PARK
JACKSONVILLE
MIDDLEBURG
(904) 264-1512
(904) 264-3627
FAX (904) 284-5937

Florida Department of State Division of Corporations Attn: Buck Kohr Regulatory Specialist P.O. Box 6327 Tallahassee, Florida 32314

RE: THE LeRAND, LLC

Dear Mr. Kohr:

Enclosed please your original correspondence dated October 6, 2008, together with an original and one copy of the revised Articles of Organization to be filed with regard to the above.

Thank you for your assistance.

Should you have any questions, please call me.

Sincerely,

L. J. Arnold III

LJAIII:lk Enclosures

cc: Randall Rogers



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 6, 2008

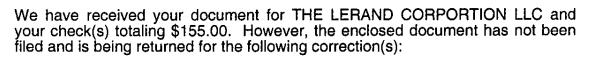
CAPITAL CONNECTION

TALLAHASSEE, FL

17

SUBJECT: THE LERAND CORPORTION LLC

Ref. Number: W08000045950



Florida LLC's cannot use the word "CORPORATION" in their names.,

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) 245-6914.

Letter Number: 208A00052678

Buck Kohr Regulatory Specialist II CAIDA

ARTICLES OF ORGANIZATION OF

THE LERAND, LLC

ARTICLE I - NAME

The name of the limited liability company is THE LERAND, LUCCON ("company").

ARTICLE II - ADDRESS

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

<u>Principal Office Address</u>: 495 Arthur Moore Drive

Green Cove Springs, Florida 32043

Mailing Address:

495 Arthur Moore Drive

Green Cove Springs, Florida 32043

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

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

Randall L. Rogers 395 Arthur Moore Drive Green Cove Springs, Florida 32043

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..

Randall L. Rogers

ARTICLE IV - MANAGERS OR MANAGING MEMBERS

The name and address of each Manager or Managing Member is as follows:

Title:

Name and Address:

"MGR" = Manager

"MGMR" = Managing Member

MGMR

Randall L. Rogers

495 Arthur Moore Drive

Green Cove Springs, Florida 32043

ARTICLE V - EFFECTIVE DATE

The effective date of the company shall be effective immediately.

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.)

Randall L. Rogers
Typed or printed name of signee