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B. KOHR  
DEC 29 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

Highland Meadows, LLC

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- ☐ 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\_\_\_\_\_

Signature

Requested by:

Seth 12/29 11:00

Name

Date

Time

ARTICLES OF ORGANIZATION  
OF  
HIGHLAND MEADOWS, L.L.C.

ARTICLE I - NAME

The name of the limited liability company is HIGHLAND MEADOWS, L.L.C.,  
("Company").

ARTICLE II - ADDRESS

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

Principal Office Address:

250 AVENUE K, SW, SUITE 100  
WINTER HAVEN, FL 33880

Mailing Address:

250 AVENUE K, SW, SUITE 100  
WINTER HAVEN, FL 33880

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

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

MARK W. SHABLA  
635 1<sup>st</sup> Street North  
Winter Haven, FL 33881

*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..*

  
MARK W. SHABLA

#### ARTICLE IV - MANAGERS OR MANAGING MEMBERS

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

Title:

"MGR" = Manager

"MGMR" = Managing Member

Name and Address:

MGR

MARK W. SHABLA

635 1<sup>st</sup> Street North

Winter Haven, FL 33881

#### 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.)

Mark W Shabla

\_\_\_\_\_  
Typed or printed name of signee