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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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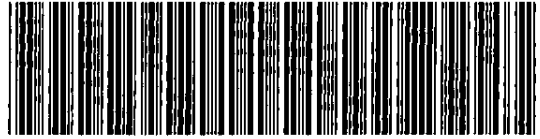
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
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S. HAWKES

MAR 18 2009

EXAMINER

**ALLAN L. DURAND**  
**ATTORNEY AT LAW**  
235 La Rue France  
Lafayette, Louisiana 70508

Phone: (337) 237-8501  
Fax: (337) 232-9599  
E-mail: [durand@plddo.com](mailto:durand@plddo.com)

March 11, 2009

Registration Section Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Re: BURGE PROPERTIES, L.L.C.  
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Dear Friends:

Enclosed please find a check for \$155 together with the Articles of Organization for BURGE PROPERTIES, L.L.C.

Please let me know if anything else is necessary to complete this filing.

Most sincerely yours,



ALLAN L. DURAND

ALD/dd  
Enclosure

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** BURGE PROPERTIES, L.L.C.  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALLAN L. DURAND  
(Name of Person)

DURAND LAW FIRM  
(Firm/Company)

235 LA RUE FRANCE  
(Address)

LAFAYETTE, LA 70508  
(City/State and Zip Code)

For further information concerning this matter, please call:

ALLAN L. DURAND at ( 337 ) 237-8501  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**Mailing Address**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street/Courier Address**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

BURGE PROPERTIES, L.L.C.

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

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**ARTICLE II - Address:**

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

**Principal Office Address:**

**Mailing Address:**

3 PORTOFINO DRIVE  
UNIT 2001  
PENSACOLA BEACH, FL  
32561

705 LOREAUVILLE RD.  
NEW IBERIA, LA 70563

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

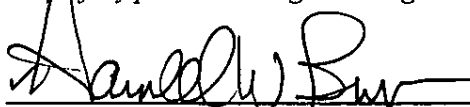
The name and the Florida street address of the registered agent are:

HAROLD BURGE  
Name

UNIT 2001, 3 PORTOFINO DR.  
Florida street address (P.O. Box **NOT** acceptable)

PENSACOLA BEACH FL 32561  
City, State, and Zip

*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..*

  
Registered Agent's Signature (REQUIRED)

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR

HAROLD BURGE  
UNIT 2001, 3 PORTOFINO DR.  
PENSACOLA BEACH, FL 32561

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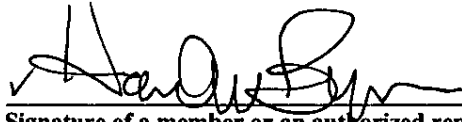
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(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**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.)

HAROLD BURGE

Typed 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)**