# L09000043432

(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



100155341821

05/05/09--01014--014 \*\*125.00

FILED
2009 MAY -4 PM 2: 01
SECRETARY OF STATE

C. LEWIS

MAY - 5 2009

EXAMINER

## **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT:	LAKE HOWARD RENO	OVATION PR	OJECT LLC (EIN 26-4764215)
	(Name of Limi	ited Liability Compa	any)
771 I I	A did to control to the decidence		
The enclosed	Articles of Organization and fee(s) are	e submitted for filing	3.
Please return	all correspondence concerning this ma	atter to the following	:
	MARC HOWARD		
<del></del>		(Name of Person)	
	LAKE HOWARD RE	ENOVATION	PROJECT LLC
		(Firm/Company)	
	PO BOX 863		
		(Address)	
	EAGLE LAKE FL 3	3839	
	(C	ity/State and Zip Code	e)
5 a d d		11	
For further in	formation concerning this matter, please	se call:	
1	MARC HOWARD	at ( 863	, 206-5358
	(Name of Person)	(Area Cod	e & Daytime Telephone Number)
Enclosed is a	a check for the following amount:		
_		□ <b>61.66.00</b> E:1:	The R Delegan Filing For
<b> √ </b> \$125.00 Fil	ing Fee \$\_\\$130.00 Filing Fee & Certificate of Status	L]\$155.00 Filin Certified Co (additional cop	py Certificate of Status &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrati Division Clifton B 2661 Exc	ourier Address ion Section of Corporations duilding ecutive Center Circle see, FL 32301

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

Δ	RT	ICI	.E.	T _	Na	me

The name of the Limited Liability Company is:

### LAKE HOWARD RENOVATION PROJECT LLC

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

#### **ARTICLE II - Address:**

Principal Office Address:

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

Mailing Address

	······································		
MARC HOWARD	MARC HOWARD		
3020 LAKE SPIRIT DR	PO BOX 863		
WINTER HAVEN FL 33880	EAGLE LAKE FL 33839		
ARTICLE III - Registered Agent, Register Limited Liability Company cannot serve as its own I business entity with an active Florida registration.)	Registered Agent. You must designate an indi	vidual or another	
The name and the Florida street address of t		2009 MAY SECRE TALLAH	TI
WILLIAM R THOP		至 -	*********
17	ame	TARY ASSE	1
905 AVENUE T S	SE .		111
Florida stree	et address (P.O. Box NOT acceptable)	FL S	U
WINTER HAVEN	FL 33880	A 2: 02 STATE FLORIDA	
City, St	ate, and Zip	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..

Registered Agent's Signature (REOURED)

(CONTINUED)
Page 1 of 2

ARTICLE IV- Manager(s) or Ma	. naging Member(s):	FILED
The name and address of each Mana		ollows: 2009 MAY -4 PM 2
The state of the s		2009 MAY -4
Title: "MGR" = Manager	Name and Address:	SECRETARY OF S
"MGRM" = Managing Member		SECRETARY OF S TALLAHASSEE, FL
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
MGR	MARC HOWARD	<u> </u>
	PO BOX 863	
	EAGLE LAKE FL 33839	<del></del>
	<del></del>	
		·
		<del></del>
		<del></del>
		<del></del>
(Use attachment if necessary)		
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.)	e date of filing: be specific and cannot be more th	(OPTIONAL) nan five business days pri
REQUIRED SIGNATURE:		
M	How	
Signature of a memb	er or an authorized representative of	a member.
(In accordance with so of this document cons that the facts stated	ection 608.408(3), Florida Statutes, the e titutes an affirmation under the penalties herein are true.)	execution s of perjury
MAR	RC HOWARD	
	vped 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)