109000081243

(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

EFFECTIVE DATE 8/20/09



100159767061

08/21/09--01030--014 **160.00

O9 AUG 21 PM 4: 06
SECRETARY OF STATE
TALL AHASSEF FLORID.

D. BRUCE

AUG 24 2009

EXAMINER

COVER LETTER

TO:	Registration Se Division of Cor				
SUBJE	CCT:	La	ndgevity, LLC.		
		Name of Limite	d Liability Company		
The end	closed Articles of	Organization and fee(s) are so	ubmitted for filing.		
Please	return all correspo	ndence concerning this matte	er to the following:		
			had L. Minor		
		1	Name of Person		
			ndgevity, LLC.		
			Firm/Company		
-		4523 4th	Avenue Drive East		
			Address		
			enton, FL 34208		
		•	/State and Zip Code @landgevity.com		
-	··········	E-mail address: (to be used for	r future annual report notification)		
For fur	ther information c	oncerning this matter, please	call:	O9,	
		L. Minor		SECRETARY 524-9166 SEE	
	Name of	Person	Area Code & Daytime Te	lephone Number	
Enclos	ed is a check for	the following amount:		PH-4: OF STA	.!
_\$ 125.	00 Filing Fee [\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & [Certified Copy (additional copy is enclosed)	\$160.00 Filing Ree, & Certificate of Status & Certified Copy	النعياة
		Mailing Address	Street/Courier Addres	(additional copy is enclosed)	
		Registration Section Division of Corporations	Registration Section Division of Corporation	_	
		P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center		

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nan The name of the Lin	ne: mited Liability Compar	ny is:					
Landgevity, LLC. (Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")							
ARTICLE II - Ade							
The mailing addres	s and street address of	the principal office of the Limited L	iability Company is:				
Principal Office Address:		Mailing Address:					
4523 4th Avenue Bradenton, FL 34		4523 4th Avenue Drive Ea Bradenton, FL 34208	<u>ast</u>				
(The Limited Liability Co business entity with an a	mpany cannot serve as its own ctive Florida registration.)	tered Office, & Registered Agent's Registered Agent. You must designate an individual of the registered agent are:					
		d L. Minor	<u>m</u> -< •				
	I	Name					
		venue Drive East	A Fig.				
		s (P.O. Box <u>NOT</u> acceptable)	A)TE				
	Bradenton, FL 342						
liability compan registered agent an statutes relating t	d as registered agent an sy at the place designate ad agree to act in this ca o the proper and complo	tate, and Zip and to accept service of process for the ed in this certificate, I hereby accept t pacity. I further agree to comply wit ete performance of my duties, and I a s registered agent as provided for in 6	the appointment as th the provisions of all Im familiar with and				

(CONTINUED)

Registered Agent's Signature (REQUIRED)

EFFECTIVE DATE 8/20/09

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:

MGR	Chad L. Minor
	4523 4th Avenue Drive East
	Bradenton, FL 34208
	the state of the s
(Use attachment if necessary)	· · · · · · · · · · · · · · · · · · ·
LE V: Effective date, if other than the	ne date of filing: August 20, 2009 (OPTIONA)
	be specific and cannot be more than five business days

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.)

Chad L. Minor
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)

FILED

09 AUG 21 PM 4: 06

SECRETARY OF STATE
TALLAHASSEE, FSTATE