

LD9000095800

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(Business Entity Name)

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2009 OCT -2 PM 4:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
Oct. 5, 2009
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Land & Sea Native Plants, LLC.
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:

Debra Sue Gibson

Name of Person

Land & Sea Native Plants, LLC.

Firm/Company

PO Box 72

Address

Parrish, FL 34219

City/State and Zip Code

deb1gibson@earthlink.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Debra S. Gibson

Name of Person

at (941)

915-9029

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 27, 2009

DEBRA SUE GIBSON / LAND & SEA NATIVE PLANTS LLC
PO BOX 72
PARRISH, FL 34219

SUBJECT: LAND & SEA NATIVE PLANTS, LLC.
Ref. Number: W09000038711

We have received your document for LAND & SEA NATIVE PLANTS, LLC. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Please return the corrected original and one copy of 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) 245-6047.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 809A00028874

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Land & Sea Native Plants, LLC.

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

ARTICLE II - Address:

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

Principal Office Address:

30600 State Road 62

Parrish, FL 34219

Mailing Address:

PO Box 72

Parrish, FL 34219

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:

Debra Sue Gibson
Name

11885 SW 33RD ST.
Florida street address (P.O. Box **NOT** acceptable)

Webster, FL 33597
City, State, and Zip

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TALLAHASSEE, FLORIDA

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..

Debra Sue Gibson
Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED

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

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Debra S. Gibson

11885 SW 33rd St

Webster, FL 33597

MGRM

Christopher E. Joiner

5124 Medulla Road

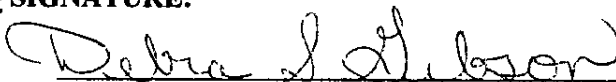
Lakeland, FL 33811-2747

(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.)

Debra S. Gibson

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)