1-09000104804

(Re	equestor's Name)	· · · · · · · · · · · · · · · · · · ·
(Ac	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies <u>.</u>	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



800162196388

10/29/09--01015--016 **155.00

OSOCI 29 PM 3: 35
SEGRETARY OF STATE
TALLAHASSEE, FLORIDA

S. HAWKES

OCT 3 0 2009

EXAMINER

COVER LETTER '

TO: Registration Section Division of Corporations
SUBJECT: Pearl Lake, 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:
Sean Goudreau Name of Person
Name of Person
Pearl Lake, LLC Firm/Company
Firm/Company
P.O. Box 470582
Address
Lake Monroe, FL 32747 City/State and Zip Code
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Sean Goudreau 11, 407, 467-4304
Sean Goudreau at (407) 467-4304 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{S155.00 Filing Fee & Certificate of Status}\$ Certificate of Status \$\ \text{Certified Copy (additional copy is enclosed)}\$ Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 32314-2661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	LLC lity Company," "L.L.C.," or "LLC.")
Pearl Lake	LLC THE STORM
(Must end with the words "Limited Liabit ARTICLE II - Address: The mailing address and street address of the property of the	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
133 Ross Lake Ln. Sanford, FL 32771	P.O. Box 470582 Lake Monroe, FL 32747
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	tered Agent. You must designate an individual or another
The name and the Florida street address of the r	oudrea 4
133 Ross D Florida street address (P.O. Santord	
liability company at the place designated in t registered agent and agree to act in this capacity statutes relating to the proper and complete pe	accept service of process for the above stated limited his certificate, I hereby accept the appointment as y. I further agree to comply with the provisions of all arformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S
Registered Agent's Signat	ure (REQUIRED)

(CONTINUED)

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:

"MCD" - Monores	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	A.C.
MGR	Sean Goudroau Tig
MGRM	Christy Goudoay
(Use attachment if necessary)	
LE V: Effective date, if other than	n the date of filing: (OPTIONAL
LE V: Effective date, if other thar ffective date is listed, the date mu	n the date of filing: (OPTIONAL st be specific and cannot be more than five business days
LE V: Effective date, if other than	the date of filing: (OPTIONAL ast be specific and cannot be more than five business days
LE V: Effective date, if other than fective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE:	the date of filing: (OPTIONAL set be specific and cannot be more than five business days Machine the date of filing:
LE V: Effective date, if other than ffective date is listed, the date must days after the date of filing.) REOUIRED SIGNATURE: Signature of a me of this document that the facts state	ember or an authorized representative of a member. th section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury and herein are true.)
LE V: Effective date, if other than ffective date is listed, the date must days after the date of filing.) REOUIRED SIGNATURE: Signature of a me of this document that the facts state	ember or an authorized representative of a member. th section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)