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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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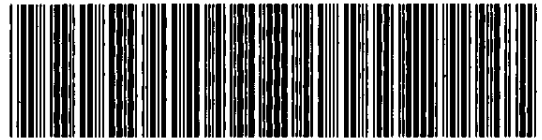
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T. HAMPTON

DEC - 1 2009

EXAMINER

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: CHERDAN 458, 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:

CHERYL LANKFORD  
Name of Person

Firm/Company

2547 CHERANGELA COURT  
Address

DELAND FL 32720  
City/State and Zip Code

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

For further information concerning this matter, please call:

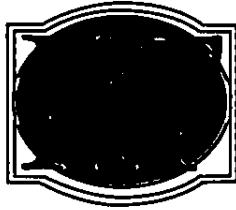
CHERYL LANKFORD at ( 386 ) 956-2459  
Name of Person Area Code & Daytime Telephone Number

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



**HUDDLESTON & TEAL P.A.**  
**ATTORNEYS AT LAW**

**MICHAEL C. HUDDLESTON ♦ MICHAEL S. TEAL**

November 24, 2009

Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee FL 32314

Re: CHERDAN 458, L.L.C.

Dear Sir or Madam:

Enclosed please find an original and one copy of Articles of Organization for the above-referenced Limited Liability Company, along with check #1127 in the amount of \$155.00 covering the filing fee and certified copy of the Articles. Should you have any questions, please contact me.

Very truly yours,

Michael S. Teal  
MST/nae  
Enc.

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

**ARTICLE I - Name:** The name of the Limited Liability Company is  
CHERDAN 458, L.L.C.

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited  
Liability Company is 1547 Cherangela Court, DeLand FL 32720.

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

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

Cheryl Lankford  
2547 Cherangela Court  
DeLand FL 32720

*Having been named as registered agent and to accept service of process for the  
above state 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

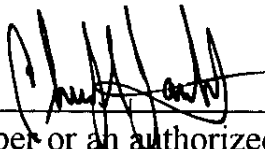
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**ARTICLE IV - Managers or Managing Members:**

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

<u>Title:</u>	<u>Name and Address:</u>
MGR	Cheryl Lankford 2547 Cherangela Court DeLand FL 32720
MGR	Danielle Flowers 2547 Cherangela Court DeLand FL 32720

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.)

\_\_\_\_\_  
CHERYL LANKFORD

Typed or printed name of signee

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