

From: HKG Main Fax

Division of Corporations

12/20/2009 15:22

12/20/2009 15:22

12/20/2009 15:22

Page 1 of 1

L09 000116940

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H09000254428 3)))



H090002544283ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : HARPER, KYNES & GELLER, P.A.
Account Number : 070651000745
Phone : (727) 799-4840
Fax Number : (727) 797-8206

FILED
09 DEC -8 AM 10:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

RECEIVED

09 DEC -8 PM 4:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LIMITED LIABILITY CO.
LRR Properties, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

S. HAWKES

DEC -9 2009

EXAMINER

H09000254428 3

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

ARTICLE I - NAME

The name of the Limited Liability Company is: **LRR Properties, LLC**

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is: 21228 Powell Road, Brooksville, FL 34604.

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE,
& REGISTERED AGENT'S SIGNATURE**

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

Susan L. Woolever
21228 Powell Road
Brooksville, FL 34604

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.


Susan L. Woolever, Registered Agent

ARTICLE IV - MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager - managed company.

ARTICLE V - MANAGER(S) OR MANAGING MEMBER(S)

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

Title:

Name and Address:

Manager

Raymond D. Woolever
4215 Southern Valley Loop
Brooksville, FL 34601

FILED
09 DEC -8 AM 10:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

From:HKG Main Fax

7978206

12/08/2009 15:22

#059 P.003/003

H09000254428 3

Manager

Susan L. Woolever
4215 Southern Valley Loop
Brooksville, FL 34601

Manager

Rachel D. Vitale
8108 Spirit Court
Trinity, FL 34655


Susan L. Woolever, Manager

FILED
09 DEC - 8 AM 10:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Susan L. Woolever
Typed or printed name of signee

H09000254428 3