

L090000118875

(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



000163386590

12/14/09--01032--005 **130.00

FILED
09 DEC 14 PM 2:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 15 2009

TRANSMITTAL LETTER

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314
850-487-6051

SUBJECT: LEO WOODCOCK, LLC.

Enclosed are an original and one copy of the articles of Organization For Florida Limited Liability Company.

**FROM: SHARON WOODCOCK
3484 3RD PLACE
VERO BEACH, FLORIDA 32968
772-766-9303**

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I-Name:

The name of the Limited Liability Company shall be: **LEO WOODCOCK, LLC.**

ARTICLE II-Address:

The mailing address and street address of the principal office of the Limited Liability Company is: **3484 3RD PLACE, VERO BEACH, FLORIDA 32968**

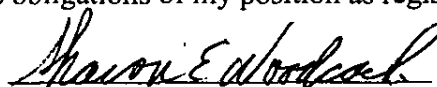
ARTICLE III-Registered Agent, Registered Office, & Registered Agent's Signature:

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

**SHARON WOODCOCK
3484 3RD PLACE
VERO BEACH, FLORIDA 32968**

FILED
09 DEC 14 PM 2:09
SECRETARY OF STATE
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..


SHARON WOODCOCK

ARTICLE IV- Management (Check box if applicable.)

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

(An additional article must be added if an effective date is requested)


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.)

LEO WOODCOCK
Typed or printed name of signee

FILING FEES:

**\$100.00 Filing Fee for Articles of Organization
\$25.00 Designation of Registered Agent
\$30.00 Certified Copy (Optional)
\$5.00 Certificate of Status (Optional)**