

L/00000003558

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

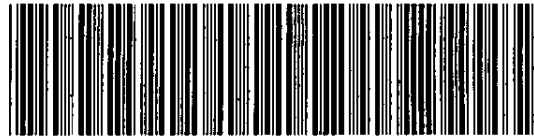
(Document Number)

Certified Copies _____ Certificates of Status _____

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JAN 12 2010
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2010 JAN 11 PM 12:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Lucky S Equine, 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:

<u>T. J. Steele</u>	FILED 2010 JAN 11 PM 2:14 SECRETARY OF STATE TALLAHASSEE, FLORIDA
Name of Person	
<u>Lucky S Equine, LLC</u>	
Firm/Company	
<u>7713 State Road 64 E</u>	
Address	
<u>Zolfo Springs, FL 33890</u>	
City/State and Zip Code	
<u>threeoaksdvm@yahoo.com</u>	
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

<u>T.J. Steele</u>	at (<u>863</u>) <u>673-4810</u>
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

ARTICLES OF ORGANIZATION
FOR
LUCKY S EQUINE, LLC
A Florida Limited Liability Company

The undersigned, desiring to form a limited liability company under and pursuant to Chapter 608, Florida Statutes, the Florida Limited Liability Company Act, does hereby adopt the following Articles of Organization for such Company:

ARTICLE I
Name

The name of this Company shall be LUCKY S EQUINE, LLC.

ARTICLE II
Duration

The term of existence of the Company shall commence upon the filing of these Articles of Organization and shall be perpetual.

ARTICLE III
Mailing Address

The mailing and street address of the principal office of this Company is 7713 State Road 64 East, Zolfo Springs, FL 33890.

ARTICLE IV
Registered Agent and Office

The name and street address of this Company's initial registered agent for service of process in this state is as follows: Terry J. Steele, 7713 State Road 64 East, Zolfo Springs, FL 33890

ARTICLE V
Management

The Company is to be a member managed company.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

IN WITNESS WHEREOF, the undersigned owner of the company, has hereunto set his hand and seal this 2nd day of January 2010.

Terry J. Steele
Terry J. Steele

STATE OF FLORIDA
COUNTY OF HENDRY

The foregoing instrument was acknowledged before me this 2nd day of January, 2010, by Terry J. Steele. His is personally known to me or produced his current drivers' license as identification.

Nancy W. Keel
NOTARY PUBLIC

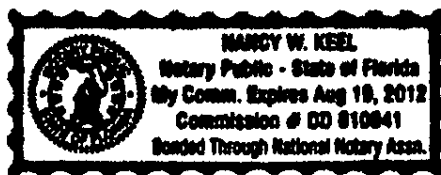
My commission expires:

Nancy W. Keel
Print Name of Notary

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 JAN 11 PM 12:14

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STATEMENT OF REGISTERED AGENT

Having been named as Registered Agent and to accept service of process for the above-stated limited liability company, 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 in Chapter 608, Florida Statutes.

Terry J. Steele
Terry J. Steele

STATE OF FLORIDA
COUNTY OF HENDRY

The foregoing instrument was acknowledged before me this 2nd day of January, 2010, by Terry J. Steele, who is personally known to me, or who produced his current drivers' license as identification.

Nancy W. Keel
NOTARY PUBLIC

My commission Expires:

Nancy W. Keel
Print Name of Notary



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