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SECRETARY OF STANDA

## **COVER LETTER**

| TO: Registration Section Division of Corporations   |                                       |  |
|---|---------------------------------------|--|
| SUBJECT: AVALON PARK HOLISTIC LIFESTYLE CENTER  | 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:   |                                       |  |
|   |                                       |  |
| Gregary B. Owens Name of Person   |                                       |  |
| Name or Person  |                                       |  |
| Avalon Park Holistic Lifestyle Center L   | LC                                    |  |
| Firm/Company  | · · · · · · · · · · · · · · · · · · · |  |
| 14060 Mailer Blud   |                                       |  |
| Address   |                                       |  |
| Orlando FL 32828  City/State and Zip Code  Argon41 - comcast · net  |                                       |  |
| City/State and Zip Code   |                                       |  |
| Argon41@ comcast.net  |                                       |  |
| E-mail address: (to be used for future annual report notification)  |                                       |  |
| For further information concerning this matter, please call:  |                                       |  |
| Gregory R. Owens at 407 325-9538  Name of Person Area Code & Daytime Telephone Number   |                                       |  |
| Name of Person Area Code & Daytime Telephone Number   | •                                     |  |
| Enclosed is a check for the following amount:   |                                       |  |
| \$125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & \$\bigcup \\$155.00 Filing Fee & \$\bigcup \\$160.00 Filing Fee & Certificate of Status \$\bigcup \\$ (additional copy is enclosed) \$\bigcup \\$ (additiona | of Status &                           |  |
| Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle   |                                       |  |
| Tallahassee, FL 32301   |                                       |  |



## FLORIDA DEPARTMENT OF STATE Division of Corporations

January 6, 2010

GREGORY B. OWENS 14060 MAILER BLVD. ORLANDO, FL 32828

SUBJECT: AVALON PARK HOLISTIC LIFESTYLE CENTER LLC

Ref. Number: W1000000523

We have received your document for AVALON PARK HOLISTIC LIFESTYLE CENTER LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Limited Liability Companies are not corporations. Limited Liability Companies are unique business entities with special characteristics and attributes formed under Chapter 608, Florida Statutes. Corporations, on the other hand, are formed under Chapter 607, Florida Statutes, and possess other distinctive traits and characteristics. Consequently, limited liability company documents cannot contain any references/terms which may implicate the entity is a corporation. Please delete any references to the term "corporation" or the like from your document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Leslie Sellers Regulatory Specialist II

Letter Number: 210A0000366

10 JAN 22 PH 12: 55
SECRETARY OF STATE

## ARTICLES OF ORGANIZATION FOR AVALON PARK HOLISTIC LIFESTYLE CENTER, LLC.

ARTICLE I - NAME:

The name of the company shall be Avalon Park Holistic Lifestyle Center, LLC.

The company has been organized to create and operate green businesses which promote healthy holistic Floridian lifestyles; and to transact any and all lawful business for which limited liability companies may be operated in the state.

**ARTICLE II - ADDRESS:** 

The principal street address and mailing address is: 14060 Mailer BLVD, Orlando, FL 32828

ARTICLE III - REGISTERED AGENT, OFFICE AND SIGNATURE

The registered agent is:

Gregory Owens, 14060 Mailer BLVD, Orlando, FL 32828

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..

Signature/Registered Agent Date

ABTICLE IV - MANAGER/MANAGING MEMBERS

The following two initial Managers are:

Michelle Owens, 14060 Mailer BLVD, Orlando, FL 32828, Managing Member

Gregory Owens, 14060 Mailer BLVD, Orlando, FL 32828, Manager

ARTICLE V - Organizer

The Organizer is:

Gregory Owers, 14060 Mailer BLVD, Orlando, FL 32828

Member Signature/Organizer Date

\$130 Filing Fees (\$125 Filing fee for Articles of Organization and Designation of Registered Ages Certificate of Status)