L10000029981

(Requestor's Name)
(Address)
(Address)
, ,
(City/State/Zip/Phone #)
(Chylerate Light Hone h)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200172011362

03/17/10--01028--022 **130.00

FILED
2010 HAR 17 PH 12: 42
SECRETARY OF STATE

C. LEWIS

MAR 1 8 2010

EXAMINER

COVER LETTER:

TO: Registration S Division of Co			•
SUBJECT: Hunter	Taylor Pine Straw		
-	Name of Limit	ed Liability Company	
The enclosed Articles of	of Organization and fee(s) are	submitted for filing.	
Please return all corresp	oondence concerning this mat	ter to the following:	
Hunter Taylo	r		
		Name of Person	
Hunter Taylor	r Pine Straw		
		Firm/Company	
6810 Odis Ya	rborough Rd		
		Address	
Glen Saint Ma	ary Florida 32040		
-	Cit	y/State and Zip Code	
Htaylor@nefc			
		for future annual report notification)	
For further information	concerning this matter, please	e call:	
Hunter Taylor		at (904) 653 1185	
Name	of Person	Area Code & Daytime Telephone N	lumber
Enclosed is a check for	or the following amount:		
□\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified Copy Certi (additional copy is enclosed) Certi	.00 Filing Fee, ficate of Status & fied 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 FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compar	ny is:
Hunter Taylor Pine Straw , LLC. (Must end with the words "Limited	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of t	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
6810 Odis Yarborough Road	6810 Odis Yarborough Road
Glen Saint Mary Florida	Glen Saint Mary Florida
32040	32040
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Hunter Taylor	TO THE CREE TO THE CAPE OF THE
ì	Name PSP 1
6810 Odis Yarboroug	gh Road
Florida stre	eet address (P.O. Box NOT acceptable)
Glen Saint Mary	FL 32040
Ci	ity, State, and Zip
liability company at the place designate registered agent and agree to act in this ca statutes relating to the proper and comple	nd to accept service of process for the above stated limited d in this certificate, I hereby accept the appointment as pacity. I further agree to comply with the provisions of all ete performance of my duties, and I am familiar with and a registered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

FILED

<u>Title:</u> "MGR" = Ma "MGRM" = !	anager Managing Member	Name and Address:	SECRETARY TALLAHASSI	EE.FL
MGRM		Hunter Taylor		
	6810 Odis Yarborough Road			
		Glen Saint Mary Florida 32040		
 				
				
			 	
•	ent if necessary)	the date of filings	(ODTION A	1)
CLE V: Effect	ive date, if other than	the date of filing: t be specific and cannot be more than five	(OPTIONA e business day	L)
CLE V: Effect effective date is 0 days after th	ive date, if other than to slisted, the date mus	the date of filing: t be specific and cannot be more than five	(OPTIONA e business day	r dil ib
CLE V: Effect effective date is 0 days after th	ive date, if other than to slisted, the date musted date of filing.)	the date of filing:t be specific and cannot be more than five	(OPTIONA e business day	r dijo
CLE V: Effect effective date is 0 days after th	ive date, if other than is listed, the date must e date of filing.) SIGNATURE:	the date of filing: t be specific and cannot be more than five and the specific and cannot be more than five and the specific and cannot be more than five and the specific and cannot be more than five and the specific and cannot be more than five and the specific and cannot be more than five and the specific and cannot be more than five and the specific and cannot be more than five and the specific and cannot be more than five and the specific and cannot be more than five and the specific and cannot be more than five and the specific and cannot be more than five and the specific and cannot be more than five and the specific and cannot be more than five and the specific and cannot be more than five and the specific and the specif	e business day	L) s prip
CLE V: Effect effective date is 0 days after th	ive date, if other than is listed, the date must e date of filing.) SIGNATURE: Signature of a men (In accordance with	nber or an authorized representative of a member section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perj	e business day	L) s prip

of Registered Agent \$ 30.00 Certified Copy (Optional)

\$125.00 Filing Fee for Articles of Organization and Designation

\$ 5.00 Certificate of Status (Optional)