

L10 000039543

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

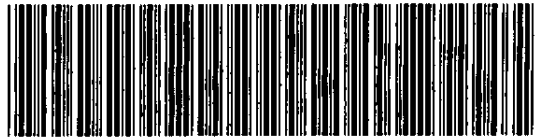
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900175118429

04/12/10--01058--025 **160.00

2010 APR 12 PM 2:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

T. CLINE

APR 13 2010

EXAMINER



THE LAW OFFICE OF
KEVIN F. JURSKINSKI, P.A.

Real Estate and Business Law

April 9, 2010

Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Legacy Loan Investments, LLC

Dear Sirs:

Enclosed please find Articles of Organization and a Certificate Designating Registered Agent for the above limited liability company.

We respectfully request that these articles be filed. We have enclosed my client's check in the amount of \$160.00 for the filing fee and return of a certified copy of the Articles of Organization to the undersigned.

Should you have any questions, please do not hesitate to contact my office. Thank you for your assistance in this matter.

Respectfully,

KEVIN F. JURSKINSKI

KFJ/ih

Enclosure

F:\LawOffice\Clients\JURSKINSKI, KEVIN\LEGACY LOAN INVESTMENTS\Ltr to Sec of State 04092010.docx

2010 APR 12 PM 2:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

**ARTICLES OF ORGANIZATION OF
LEGACY LOAN INVESTMENTS, LLC**

The undersigned members hereby certify that they have associated for the purpose of becoming a limited liability company under the laws of the State of Florida, providing for the formation, rights, privileges, and immunities of limited liability companies for profit. The undersigned further declare that the following Articles shall be the Charter and authority for the conduct of business of such limited liability company.

NAME

The name of the limited liability company shall be **LEGACY LOAN INVESTMENTS, LLC** (the "Company").

ADDRESS OF PRINCIPAL PLACE OF BUSINESS

The mailing address and street address of the principal office of this Company shall be 20709 Torre Del Lago Street, Estero, FL 33928.

REGISTERED AGENT

The name and address of the initial registered agent in the State of Florida is as follows:

Kevin F. Jursinski, Esquire
7800 University Pointe Drive
Suite 200
Fort Myers, Florida 33907

MANAGEMENT

The Company shall be manager-managed.

FILED
2010 APR 12 PM 2:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

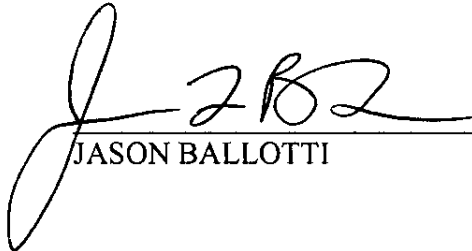
MEMBERSHIP

The Members shall have the right to admit new members upon making such contributions as are set out in the Operating Agreement, and otherwise complying with and agreeing to the terms and provisions of the Operating Agreement.

EFFECTIVE DATE OF FILING

Pursuant to Florida Statute 608.409 the effective date of filing of these Article of Organization and commencement of the existence of this Limited Liability Company shall be the date executed.

Executed by the undersigned members at Fort Myers, Florida, on this 9th day of April, 2010.


JASON BALLOTTI

2010 APR 12 PM 2:06
CLERK OF THE
SECRETARY OF STATE
TALLAHASSEE, FLORIDA


FILED

STATE OF FLORIDA
SS:
COUNTY OF LEE

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid, to take acknowledgements, personally appeared JASON BALLOTTI to me known to be the person described herein or ~~who produced~~ as identification, and who did take an oath.

WITNESS my hand and official seal in the County and State last aforesaid this 9th day of April, 2010.




NOTARY PUBLIC
(SEAL)

**CERTIFICATE OF DESIGNATION OF REGISTERED OFFICE
AND REGISTERED AGENT**

**PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA
STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS
THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED
OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.**

The name of the limited liability company is **LEGACY LOAN
INVESTMENTS, LLC.**

The name of the initial registered agent of the limited liability company is Kevin
F. Jursinski, Esquire and the address of the office of the registered agent is 7800
University Pointe Drive, Suite 200, Fort Myers, Florida 33907.

REGISTERED AGENT ACCEPTANCE

Having been named as registered agent and to accept services 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 that 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.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 9th day of

April, 2010.



KEVIN F. JURSKINSKI, ESQUIRE

2010 APR 12 PM 2:06
FILED
TALLAHASSEE
SECRETARY OF STATE
FLORIDA