

L1000059443

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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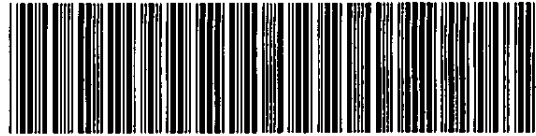
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

S. HAWKES

JUN 02 2010

EXAMINER

S. HAWKES

APR 27 2010

EXAMINER

W410-20731



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 29, 2010

JAMES RYAN SCHWARZ  
12696 61ST STREET NORTH  
WEST PALM BEACH, FL 33412

SUBJECT: FOUR PALMS RANCH LLC  
Ref. Number: W10000020731

We have received your document for FOUR PALMS RANCH 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):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on . Please amend your document accordingly.

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) 245-6955.

Suzanne Hawkes  
Regulatory Specialist II

Letter Number: 010A00010605

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Four Palms Ranch 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:

James Ryan Schwarz  
Name of Person

Four Palms Ranch LLC  
Firm/Company

12696 61st Street North  
Address

West Palm Beach FL 33412  
City/State and Zip Code

rschwarz@neptuneresearch.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jame Ryan Schwarz at ( 561 ) 779-0158  
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 FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

Four Palms Ranch LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

#### Principal Office Address:

12696 61st Street North  
West Palm Beach Florida 33412

#### Mailing Address:

12696 61st Street North  
West Palm Beach Florida 33412

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Abbie G Schwarz

Name

12696 61st Street North

Florida street address (P.O. Box **NOT** acceptable)

West Palm Beach FL 33412

City, State, and Zip

*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.*

Abbie G. Schwarz

Registered Agent's Signature (REQUIRED)

**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

MGR

CEO

**Name and Address:**

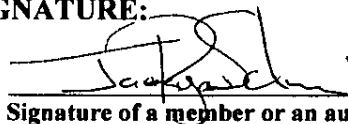
Abbie G Schwarz  
12696 61st Street North  
West Palm Beach FL 33412

James R Schwarz  
12696 61st Street North  
West Palm Beach FL 33412

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: date of filing Feb 17th, 2010. (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**



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.)

James Ryan Schwarz  
Typed or printed name of signee

**Filing Fees:**

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

FILED  
10 JUN -1 AM 10:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA