

L100000070547

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

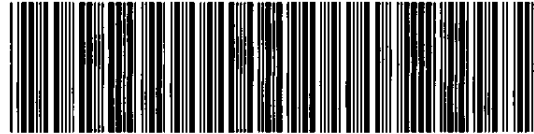
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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POTTER CLEMENT LOWRY & DUNCAN

ATTORNEYS AT LAW

308 EAST FIFTH AVENUE
MOUNT DORA, FLORIDA 32757

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DEL G. POTTER, P.A.*
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JOSEPH N. ALEXANDER

PHONE: (352) 383-4186
FAX: (352) 383-0087

*Certified Circuit Mediator
**Of Counsel

June 29, 2010

VIA UPS NEXT DAY AIR

Department of State
Division of Corporations
Clifton Bldg.
2661 Executive Center Circle
Tallahassee, FL 32301

**Re: Articles of Organization
Ilkka & Ilkka, LLC**

Dear Sir or Madam:

Enclosed please find an original and one (1) copy of Articles of Organization for the above-referenced company. You will also find enclosed this firm's check payable to the Department of State in the amount of \$173.75, representing the following fees:

\$100.00	Filing Fee
\$ 35.00	Registered Agent Designation
\$ 8.75	Certificate of Status
<u>\$ 30.00</u>	Certified Copy
 \$173.75	 Total

We would appreciate your filing the enclosed Articles and sending us confirmation of same.

If you have any questions, please do not hesitate to contact me. We appreciate your assistance in this matter.

Very truly yours,


Archie O. Lowry, Jr.

AOLjr/rp
Enclosures

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**ARTICLES OF ORGANIZATION
OF
ILKKA & ILKKA, LLC**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby make, acknowledge, and file the following Articles of Organization.

ARTICLE I - NAME

The name of the limited liability company shall be ILKKA & ILKKA, LLC ("company").

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the company is 8301 CR 44, Leg A, Leesburg, FL 34788.

ARTICLE III - DURATION

The company shall commence its existence on the date these Articles of Organization are filed by the Florida Department of State or on another effective date as specified. The company's existence shall be perpetual unless the company is dissolved earlier as provided in these Articles of Organization or in the Operating Agreement.

ARTICLE IV - REGISTERED AGENT AND OFFICE

The name of Company's initial registered agent in Florida is Don J. Ilkka. The address of Company's registered office in Florida is 8301 CR 44, Leg A, Leesburg, FL 34788.

ARTICLE V - ADMISSION OF NEW MEMBERS

Except as set forth in the Operating Agreement, no additional members shall be admitted to the company except with the unanimous written consent of all the members of the company and on such terms and conditions as shall be determined by all the members.

ARTICLE VI - MANAGEMENT

The company shall be managed by a manager in accordance with Operating Agreement adopted by the members for the management of the business and affairs of the company. The Operating Agreement may contain any provisions for the regulation and management of the affairs of the company not inconsistent with law or these articles of organization. The name and address of the initial manager of the company is Don J. Ilkka, 8301 CR 44, Leg A, Leesburg, FL 34788.

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STATE OF FLORIDA

ARTICLE VII – LIMITATION ON AGENCY AUTHORITY OF MEMBERS

Pursuant to Section 608.4235 of the Florida Limited Company Act, no member of the Company shall be an agent of the Company solely by virtue of being a member.

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this 29 day of June, 2010, in Leesburg, Lake County, Florida.

In accordance with Section 608.408(3), Florida Statutes, the execution of this Affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.



DON J. ILKKA - Member



KATHLEEN A. ILKKA - Member

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TALLAHASSEE, FLORIDA

Sworn to and subscribed before me this 29th day of June, 2010, by Don J. Ilkka.



Notary Public, State of Florida
Print Name: Christina Suarez

Personally Known ☒


OR

Produced Identification _____

Type of Identification Produced: _____

(SEAL)

Sworn to and subscribed before me this 25 day of June, 2010, by Kathleen A. Ilkka.



Notary Public – State of Florida
Print Name: Marlene R Conte

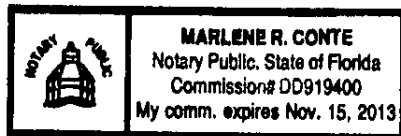
Personally Known _____

OR

Produced Identification X

Type of Identification Produced: FL D / LI 420.501.57.503-0

(SEAL)



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NOTARY PUBLIC
MARLENE R. CONTE
TALLAHASSEE, FLORIDA

ACCEPTANCE BY REGISTERED AGENT:

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, Fla. Stat.



Don J. Ilkka, Registered Agent

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