L10000128590

(Reque	estor's Name)	
(Addre	ss)	
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(City/S	tate/Zip/Phone	e #)
PICK-UP	WAIT	MAIL.
(Busin	ess Entity Nan	ne)
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to Fili	ng Officer:	

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Effective Date 12/12/10

12/15/10--01022--027 **160.00

10 DEC 15 AN II: 35
SECRETARY OF STATE
TAN AHASSEE, FLORIC

J. BRYAN

DEC 16 2010

EXAMINER

COVER LETTER

TO:	Registration Division of	n Section Corporations		
SUBJ	ECT: '	Rancho Name of Limited	Pequeño, LL d Liability Company	.C.
The er	nclosed Articles	s of Organization and fee(s) are so	ubmitted for filing.	
Please	return all corre	espondence concerning this matte	r to the following:	
:		Carothers	Hall Evans	A SECTION OF THE
	. t 8 x . t	_{e.} 1	Name of Person	C15 A
	****		Firm/Company	THE STATE OF THE S
		7660 Foun	ders way	33
	<u>*</u>	Ponte Vedro	Beach, H.	32082
		Carevans	e bell south	; net
For fu	uther informati	on concerning this matter, please	call:	
	arother Na	rs Evans me of Person	at (<u>904</u>) <u>347</u> Area Code & Daytime T	4653 elephone Number
Enclo	osed is a check	k for the following amount:		
\$125.0	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	Street/Courier Addra Registration Section Division of Corporati	

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	O R THE
The name of the Limited Liability Company is:	
Rancho Peque	
(Must end with the words "Limited Liability (Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the prince	ipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7660 Founders Way Ponte Vedra Beach, Fl. 32082	76.60 Founders Way Porte Vedra Beach, F1. 32082
ARTICLE III - Registered Agent, Registered O (The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.)	
The name and the Florida street address of the reging Carothers H. E.	stered agent are:
Name	<u> </u>
7660 Founder Florida street addres	s (P.O. Box NOT acceptable)
Ponte Vedra Beach, F City, State,	2 32082 and Zip
Having been named as registered agent and to accept liability company at the place designated in this registered agent and agree to act in this capacity. It is statutes relating to the proper and complete performancept the obligations of my position as register	certificate, I hereby accept the appointment as I further agree to comply with the provisions of all rmance of my duties, and I am familiar with and
Registered Agent's Signature	(REQUIRED)

(CONTINUED)

ARTICLE IV- Manager(s) o The name and address of each	r Managing Member(s): Manager or Managing Member is as follows:
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Membe	Name and Address:
_MGR	Carothers Hall Evans
MGRM	HEIDI HIGGINS EVANS HUSTIN Clayton Evons Hortez Chevney Evons
MGRM	Doncan Stauffer Evans
(Use attachment if necessary)	
	han the date of filing: December 12, 2010(OPTIONAL) must be specific and cannot be more than five business days prio
Signature of a	member or an authorized representative of a member.
constitutes an affirmati I am aware that any fal constitutes a third degr	ction 608.408(3), Florida Statutes, the execution of this document ion under the penalties of perjury that the facts stated herein are true. Is information submitted in a document to the Department of State ree felony as provided for in s.817.155, F.S.)
<u>C</u>	AROTHERS H. EVANS Typed or printed name of signee
. Elling Food	· · ·

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)