

#L11000004192

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(Requestor's Name)

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(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

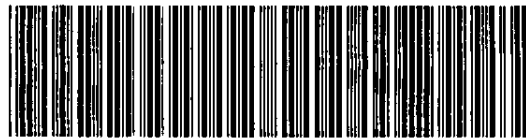
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



200188930632

EFFECTIVE DATE  
01/11/2011

12/23/10--01033--024 \*\*125.00

FILED  
11 JAN 10 PM 2:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. BALLY  
EXAMINER

JAN 11 2011



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 28, 2010

PEGGY ROUNDS  
1943 NIBLICK DRIVE  
JACKSONVILLE, FL 32210

SUBJECT: GREEN LEAF FIVE, LLC.  
Ref. Number: W10000059415

We have received your document for GREEN LEAF FIVE, LLC. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

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) 245-6870.

Karen A Saly  
Regulatory Specialist II

Letter Number: 910A00029865

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Green Leaf Five, 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:

Peggy Rounds

Name of Person

Firm/Company

1943 Niblick Dive

Address

Jacksonville, FL 32210

City/State and Zip Code

brucepeggy@bellsouth.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Pete Vansandt

Name of Person

at ( 904 ) 389-3540

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:

Green Leaf Five LLC.

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

EFFECTIVE DATE  
01/11/2011

### ARTICLE II - Address:

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

#### Principal Office Address:

1943 Niblick Drive  
Jacksonville, FL 32210

#### Mailing Address:

1943 Niblick Dr.  
JACKSONVILLE, FL  
32210

### 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:

Vansandt, Richard L, Jr. "Pete", as an individual  
Name

2431 Blanding Blvd.

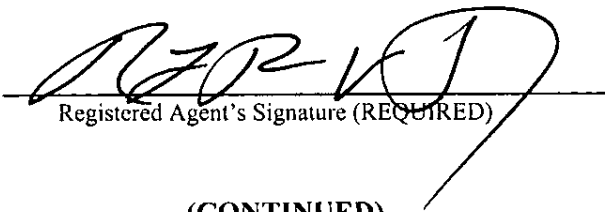
Florida street address (P.O. Box **NOT** acceptable)

Jacksonville FL 32210

City, State, and Zip

FILED  
11 JAN 10 PM 2:01  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

*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..*

  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

**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

**Name and Address:**

MGR

Peggy Rounds

1943 Niblick Drive

Jacksonville, FL 32210

MGRM

Patricia A. Vansandt

1339 Ellis Road

Jacksonville, FL 32205

MGRM

Paula Vansandt

1449 Tommy Hitchcock Ave

Daytona Beach, FL 32124

MGRM

R. L. "Pete" Vansandt c/o Vansandt Real Estate

2431 Blanding Blvd.

Jacksonville, FL 32210

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: Jan 11, 2011. (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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Peggy L. Rounds

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)

MGRM

Steve A. Vansandt

4682 Nottingham Road

Jacksonville, FL 32210