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(Requestor's Name)	
(Address)	800196005378
(Address)	_   .
(City/State/Zip/Phone #)	-
PICK-UP WAIT MAIL	
(Business Entity Name)	02/25/1101031002 **125.00 -
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Certified Copies Certificates of Status	-
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EXAMINER

# **COVER LETTER**

TO: **Registration Section Division of Corporations** SUBJECT: Countryside Sales, 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: Edwin Everhart Jr. Name of Person Countryside Sales, LLC Firm/Company 5422 N Hwy 314A Address Silver Springs, FL 34488 City/State and Zip Code heverhartjr@cfl.rr.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Edwin Everhart Jr. Area Code & Daytime Telephone Number Name of Person Enclosed is a check for the following amount: **✓** \$125.00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status Certified Copy 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

(additional copy is enclosed)

EFFECTIVE DATE 2/23/2011

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

Countryside Sales, 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:	Mailing Address:	
14385 East Highway 40	14385 East Highway 40	
Silver Springs, FL	Silver Springs, FL	
34488	34488	

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:

Edwin Everhart	Jr.
	Name
5422 N. Hwy	/ 314A
Florida	street address (P.O. Box NOT acceptable)
Silver Springs,	<sub>FL</sub> 34488
	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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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

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

MGRM	Edwin Everhart Jr.
	5422 N. Hwy 314A
	Silver Springs, FL 34488
MGRM	William Richardson
The state of the s	7603 N. Hwy 314A
	Silver Springs, FL34488
MGRM	Deanna Richardson
	7603 N. Hwy 314A
	Silver Springs, FL 34488
Use attachment if necessary)	
	an the date of filing: 02/23/2011 . (OPTIO
ective date is listed, the date m days after the date of filing.)	ust be specific and cannot be more than five business of

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.)

Edwin Everhart, Jr.

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)