

L11 0000 66328

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

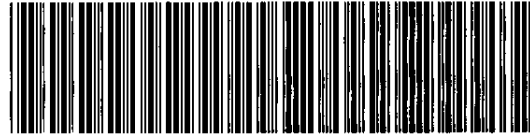
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



400208197324

06/06/11--01051--020

160.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2011 JUN - 6 PM 1:22

FILED

T. CLINE

JUN - 7 2011

EXAMINER

**Lansing Oaks, LLC**  
410 Turkey Creek  
Alachua, Florida 32615  
(386) 462-2583 Phone/Fax

June 3, 2011

Registration Section  
Division of Corporation

To Whom It May Concern:

Please find attached our application for **Lansing Oaks, LLC**, along with our check #1846 in the amount of \$160.00.

If you need any further information please contact me at the number listed above or my cell (352) 359-2996.

Thank you for your consideration in this matter.

Sincerely,

  
Peggy A. Arnold

Attachment: LLC Application

FILED  
2011 JUN -6 PM 1:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: LANSING OAKS, 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 Arnold**

Name of Person

Firm/Company

**410 Turkey Creek**

Address

**Alachua, FL 32615**

City/State and Zip Code

**pjarnold@cox.net**

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

For further information concerning this matter, please call:

**Peggy A. Arnold**

Name of Person

at **(386) 462-2583**

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

2011 JUN -6 PM 1:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

**LANSING OAKS, 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:

410 Turkey Creek

Alachua, FL 32615

### Mailing Address:

Same

## 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:

Peggy A. Arnold

Name

410 Turkey Creek

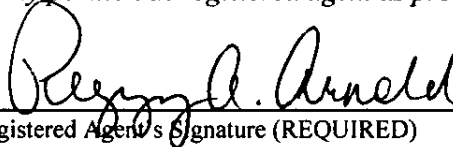
Florida street address (P.O. Box **NOT** acceptable)

Alachua

FL 32615

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)

FILED  
2011 JUN -6 PM 1:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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:**

MGRM

Keith Smith

1809 NW 24 Street

Gainesville, FL 32605

MGRM

James A. Arnold, III

410 Turkey Creek

Alachua, FL 32615

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_. (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.)

Keith Smith

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  
2011 JUN -6 PM 1:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA