

L11 0000 90282

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

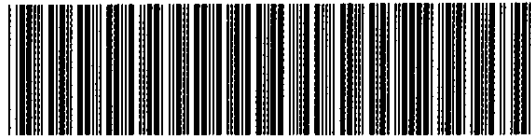
Special Instructions to Filing Officer:

Office Use Only

B. KOHR

AUG 5 2011

EXAMINER



400210263604

08/05/11--01021--011 **125.00

RECEIVED

11 AUG -5 PM 12: 22

OFFICE OF THE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 AUG -5 PM 3: 07

**CORPORATE
ACCESS,
INC.**

"When you need ACCESS to the world"

236 East 6th Avenue . Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

WALK IN

PICK UP:

8/5/11 [Signature]

FILED STATE
DIVISION OF CORPORATIONS
11 AUG -5 PM 3:07

☐ CERTIFIED COPY

☒ PHOTOCOPY

☐ CUS

☒ FILING

LLC

1.

Lyons Property Holdings, LLC
(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 AUG -5 PM 3:07

ARTICLE I - Name:

The name of the Limited Liability Company is:

LYONS PROPERTY HOLDINGS, LLC

ARTICLE II - Address:

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

Principal Office Address:

16245 NW 112th Court
Reddick FL 32686

Mailing Address:


16245 NW 112th Court
Reddick FL 32686

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Jason Lyons
16245 NW 112th Court
Reddick FL 32686

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, Florida Statutes.



Jason Lyons

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

The names and addresses of the Managers are as follows:

Title:

Name and Address:

"MGR"

Jason Lyons
16245 NW 112th Court
Reddick FL 32686

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.)

Jason Lyons

Typed or printed name of signee