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## FLORIDA DEPARTMENT OF STATE Division of Corporations

August 24, 2011

SHINNECOCK PROPERTIES L.L.C. 3 WILLOW DR. PALM COAST, FL 32137

SUBJECT: SHINNECOCK PROPERTIS L.L.C.

Ref. Number: W11000044096

We have received your document for SHINNECOCK PROPERTIS L.L.C. 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 document is illegible and not acceptable for imaging.

Please print the information on your articles clearly as we can not make out the hand writing.

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) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 411A00019831

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Shinnecock Proportion L.L.C
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:
Marie of Person
Shinnecock Proportios LLC
3 Uillow Dive
Pola Coast FL 32137
City/State and Zip Code    De   Ker @ fa./exasa   Com   E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (3R) 447 9/99  Area Code & Daytime Telephone Number
And the bound of t
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status} \text{S155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Co	ompany is:
Shinnece	ock Properties 2.4.C. "Limited Liability Company." L.L.C.," or "LLC.")
(Must end with the words	'Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	ess of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:

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:

**ARTICLE I - Name:** 

Name

3 Willow Drive

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

Palm Coast, FL 32/37

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Bol William Welker  3 Willow Drive  Palm Coast Fi 32137
MGRM	Andrew Mall 27 Changing Cross Hampton Bays NY 11946
MGRM	Robert Ericson 22 Pitt Lane Palm Coast FL 32164
(Use attachment if necessary)	
CLE V: Effective date, if other than the	e date of filing: (OPTIONAL). The specific and cannot be more than five business days pri

**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.)

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)