# L11000/15633

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**EXAMINER** 

# **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Lift Access, LI	_C	
Sebilet.	Name of Limited Liability Company	·······
The enclosed Articles of Organization	and fee(s) are submitted for filing.	
Please return all correspondence conc	erning this matter to the following:	
Laurie W. Vest		
200110 17. 1000	Name of Person	
	Firm/Company	
2951 Westgate Di	ive	
	Address	
Eustis, FL 32726		2011 SEC TABLE
	City/State and Zip Code	ZUII OCT - SEGRETAR ALEXAMASS
laurievest@aol.com	ess: (to be used for future annual report notification	SA I
For further information concerning thi	•	The sew
Laurie Vest	at (352 ) 357-49	<b>≥≥</b> <u>:</u>
Name of Person	Area Code & Daytime	Telephone Number
		2-514-9217
Enclosed is a check for the followi	ng amount:	
\$125.00 Filing Fee \$130.00 Fi Certificat	ling Fee & \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Ad Registration Division of P.O. Box 6	Section Registration Section Corporations Division of Corporat	

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limit	ted Liability Company	is:		
Lift Access, LI	_C			
(Must e	nd with the words "Limited Li	iability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Addre The mailing address a		e principal office of the Limited	Liability Compa	ny is:
Principal Office Add	ress:	Mailing Address:		
2951 Westgate Drive		2951 Westgate Drive		
Eustis, FL 32726		Eustis, FL 32726		
The Limited Liability Compa business entity with an activ The name and the Flor	any cannot serve as its own Re	me		T mo
<b>F</b>		address (P.O. Box <u>NOT</u> acceptable)		
Eu	stis	FL 32726 State, and Zip		
liability company of registered agent and of statutes relating to the	as registered agent and a at the place designated i agree to act in this capa he proper and complete	to accept service of process for the in this certificate, I hereby accept acity. I further agree to comply with performance of my duties, and I segistered agent as provided for in	the appointment ith the provisions am familiar with	as s of all and

(CONTINUED)

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGMR — Ivianaging Member	Laurie W. Vest 2951 Westgate Drive Eustis, FL 32726
(Use attachment if necessary)	SECRE TAGLINA
RTICLE V: Effective date, if other than the an effective date is listed, the date must be or 90 days after the date of filing.)	date of filing: (DETIONAL) e specific and cannot be more than five business days prio
REQUIRED SIGNATURE:	nie W. Vest
Signature of a membe	er 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.)

Laurie W. Vest

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)