

L11000116956

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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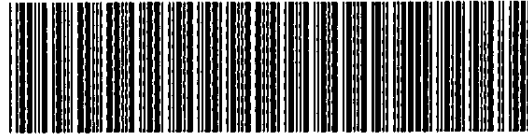
(Business Entity Name)

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OCT 11 AM 8:23

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. BRYAN

OCT 12 2011

EXAMINER

**DONNELLY & RUSSO, P.A.**

ATTORNEYS AT LAW

3708 W. EUCLID AVENUE, TAMPA, FLORIDA 33629

**SEAN V. DONNELLY** †

**JOSEPH C. RUSSO**

\*ALSO ADMITTED IN ILLINOIS

† OF COUNSEL

(813) 832-9790 PHONE

(813) 832-9739 FAX

October 10, 2011

Secretary of State  
Division of Corporations  
PO Box 6327  
Tallahassee, Fl. 32314

FILED  
OCT 11 AM 8:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Re: Filing of Articles of Organization for Out East Properties, LLC

To Whom It May Concern:

Please find enclosed the Articles of Organization for referenced corporation, along with a check for \$130.00 for the filing fees.

Please file the Articles of Organization and provide our office with a Certificate of Good Status.

Thank you for your attention to this matter. If you have any questions, please feel free to contact me.

Sincerely,



Vikki Brown

Legal Assistant to Joseph C. Russo

Enc.

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

The undersigned hereby organizes a Limited Liability Company in accordance with the Florida Statutes and pursuant to the following Articles of Organization.

ARTICLE 1

Name

The name of this Limited Liability Company is: **Out East Properties, LLC**

ARTICLE 2

Mailing Address & Principal Office Address

The mailing address and principal office of this Limited Liability Company is: **139 Chesapeake Avenue, Tampa, Fl. 33606.**

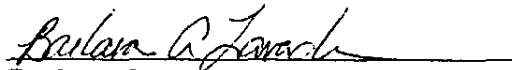
ARTICLE 3

Initial Registered Office and Agent

The street address of the initial registered office of this Limited Liability Company is **139 Chesapeake Avenue, Tampa, Fl. 33606**, and the name of the initial registered agent of this Limited Liability Company at that address is **Barbara Lavender**.

Acceptance of Registered Agent

*Having been named as registered agent to accept service of process for the above-stated Limited Liability Company at the place designated in this certificate, I hereby accept the appointment of 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 in Chapter 608, Florida Statutes.*

  
**Barbara Lavender**

ARTICLE 4

Managers/Managing Members

This Limited Liability Company is to be managed by the following Managing Members (MGRM):

- 1) **Barbara Lavender, 139 Chesapeake Avenue, Tampa, Fl. 33606; and**
- 2) **Daniel Lavender, 139 Chesapeake Avenue, Tampa, Fl. 33606.**

**FILED**  
**OCT 11 AM 8:28**  
**REGISTRAR OF STATE**  
**WILLIAMSBURG, FLORIDA**

IN ACCORDANCE WITH section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true and correct. The undersigned is authorized and has executed these Articles, this 10 day of Oct, 2011.

Barbara A. Lavender  
**Barbara Lavender**  
Authorized Managing Member

**STATE OF FLORIDA  
COUNTY OF HILLSBOROUGH**

The foregoing instrument was acknowledged before me this 10th day of Oct, 2011 by **Barbara Lavender**.



Type, Print or Stamp Name of Notary  
Personally known \_\_\_\_\_  
or Produced Identification ✓  
Type of Identification Produced Florida  
Drivers License

**FILED**  
**10 OCT 11 AM 8:28**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**