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SECRETARY OF STATE



## Eraclides, Johns, Hall, Gelman, Johannessen & Goodman, LLP

Reply to Jr. Myors: 12500 BRANTLEY COMMONS CT., STE. 101 • FT. MYERS, FL 33907 • PHONE: (239) 226-1660 • FAX: (239) 226-1661

Thomag at again Hormag at again Hormag at a gain Hormag Eraclides
Theodore M. Johns
Brad Hall
Mark H. Gelman
Kristen L. Johannessen
Daniel R. Goodman
Dawn R. Traverso
Christopher D. White
Jennifer T. Pollock
Kendall Mills
Frank Cole
Morgan A. Indek
Mary Frances Nelson
Michael D. Quiggins
Nicole Florentino

David C. Halpern

Lesley E. Burkert Ya'Sheaka S. Campbell Betsy Campo Barbara K. Case Gina Case Vanessa A. DeRosa Lipsky Shawn A. Diederich Cindy R. Galen Barbara Glas Jacqueline Green Douglas A. Orr Matthew J. Thompson Jennifer M. Watson Matthew M. Whiddon William J. Wicland, II D. Edward Williamson, Jr. Dale E. Workman

\*Board Certified to Workers Compensation

GAINESVILLE / OCALA 5216 Southwest 91" Drive Gainesville, Florida 32608 Phone: (352) 375-6192 Fax: (352) 375-6196

JACKSONVILLE 4811 Atlantic Boulevard Jacksonville, Florida 32207 Phone: (904) 306-9955 Fax: (904) 306-9951

MIAMI 2875 NE 191" St. Ste. 802 Aventura, Florida 33180 Phone: (305) 466-4401 Fax: (305) 466-4404

ORLANDO 1900 Summit Tower Blvd., Ste. 440 Orlando, Florida 32810 Phone: (407) 660-0333 Fax: (407) 660-0444

PENSACOLA 801 West Romana Street, Suite D Pensacola, Florida 32502 Phone: (850) 434-7522 Fax: (850) 437-9700

SARASOTA 2030 Bee Ridge Road Sarasota, Florida 34239 Phone: (941) 955-0333 Fax: (941) 955-2510

TALLAHASSEE 177 Salem Court Tallahassee, Florida 32301 Phone: (850) 222-6406 Fax: (850) 222-6408

TAMPA 4320 W. Kennedy Boulevard Tampa, Florida 33609 Phone: (813) 222-8880 Fax: (813) 222-8881 November 7, 2011

### Via Certified Mailing Receipt Number: 7008-1140-0001-4116-9036

(1100330)
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Sir or Madam:

Please accept the following "Cover Letter" as well as Articles of Organization for Florida Limited Liability Company, which the undersigned hereby submits on behalf of its client, 4 Leaf Construction, LLC.

As per, the Cover Letter form, 4 Leaf Construction, LLC is requesting that a Certified Copy as well as a Certificate of Status be returned to the Registered Agent, Daniel L. Bauer, 822 Atherton Avenue, Lehigh Acres, Florida 33971. Please furnish those documents directly to Daniel L. Bauer not the undersigned.

Enclosed is a check for \$160.00, for the Filing Fee, Certificate of Status and Certified Copy.

Finally, if there is anything deficient with this application or the payment method, please contact the undersigned.

Respectfully submitted.

DOUGLAS A. ORR

DAO/ts Enclosures cc: Client

### **COVER LETTER**

то:	Registration Section Division of Corporations		
SURII	<sub>IECT:</sub> 4 Leaf Construction, LL0		
30 <b>50 1</b>		Liability Company	
The en	nclosed Articles of Organization and fee(s) are sub	omitted for filing.	
Please	e return all correspondence concerning this matter	to the following:	
	Daniel L. Bauer		
	Ni	ame of Person	
	4 Leaf Construction, LLC		
	Fi	irm/Company	
	822 Atherton Avenue		
		Address	
	Lehigh Acres, FL 33971		
		tate and Zip Code	
	Dlbauer01@Gmail.com	future annual report notification)	
For fur	orther information concerning this matter, please ca	·	
Dani	iel L. Bauer	<sub>t (</sub> 239 <sub>) 258-1101</sub>	
	Name of Person	Area Code & Daytime Telep	hone Number
Enclos	sed is a check for the following amount:		
\$125.00	0 Filing Fee \$\sum_\$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 Cl Tallahassee, FL 32301	ircle

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY **ARTICLE I - Name:** The name of the Limited Liability Company is: 4 Leaf Construction, 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: Mailing Address:** 822 Atherton Avenue 822 Atherton Avenue Lehigh Acres, FL 33971 Lehigh Acres, FL 33971 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: Daniel L. Bauer Name 822 Atherton Avenue

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..

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

FL 33971 City, State, and Zip

Lehigh Acres

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager	Name and Address:	
"MGRM" = Managing Member		
MGR/MGRM	Daniel L. Bauer	
<u> </u>	822 Atherton Avenue	
	Lehigh Acres, FL 33971	
MGRM	Diane L. Bauer	
	822 Atherton Avenue	
	Lehigh Acres, FL 33971	
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CLE V: Effective date, if other than effective date is listed, the date must 0 days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a ment of the date of filing and the date of filing.	mber or an authorized representative of a member.	ys prior
CLE V: Effective date, if other than effective date is listed, the date must 0 days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a mer (In accordance with section constitutes an affirmation u I am aware that any false in constitutes a third degree fe	mber or an authorized representative of a member.  608.408(3), Florida Statutes, the execution of this document ander the penalties of perjury that the facts stated herein are transformation submitted in a document to the Department of States.	ys prior

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)