

# L11000129804

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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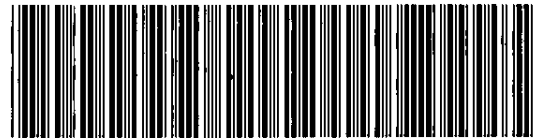
(Business Entity Name)

(Document Number)

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11 NOV 14 PM 2:29  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
EXAMINER  
NOV 15 2011



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 25, 2011

PHELPS DUNBAR LLP / GREGORY D PIRKLE, ESQ.  
P.O. BOX 1220  
TUPELO, MS 38802

SUBJECT: LONGFELLOW, LLC  
Ref. Number: W11000054673

We have received your document for LONGFELLOW, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

The document number of the name conflict is J87451 "LONGFELLOW, INC.".

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A Saly  
Regulatory Specialist II

Letter Number: 811A00024400

## **PHELPS DUNBAR**

U.P. Louisiana | Mississippi | Texas | Florida | Alabama | North Carolina | London  
One Mississippi Plaza | 201 South Spring Street, Seventh Floor  
Tupelo, Mississippi 38804  
662-842-7907  
662-842-3873 Fax

### **FACSIMILE COVER SHEET**

November 14, 2011

OUR FILE: 26074-0001

TO: Karen Saly  
Florida Department of State  
Division of Corporations

FACSIMILE NO: (850) 245-6030

TELEPHONE NO.: (850) 245-6870

FROM: Olivia D. Ward

RE: Longfellow Properties, LLC

TOTAL PAGES 4 (INCLUDING THIS PAGE)

MESSAGE: Karen,

We are in receipt of the enclosed letter from you dated October 25, 2011 returning the Articles of Organization as the name of the company was already in use. I have attached hereto the revised Articles listing the name as Longfellow Properties, LLC. Please file the Articles in your usual manner and return a certified copy to my attention at P.O. Box 1220, Tupelo, MS 38802. Should you have any questions, please contact me at (662) 690-8133.

Sincerely,

Olivia Ward

RECEIVED  
11 NOV 14 PM 3:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

#### **CONFIDENTIALITY NOTICE**

This facsimile transmission (and/or the documents accompanying it) may contain confidential information belonging to the sender which is protected by the attorney-client privilege. The information is intended only for the use of the individual or entity named above. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution, or the taking of any action in reliance on the contents of this information is strictly prohibited. If you have received this transmission in error, please immediately notify us by telephone to arrange for the return of the documents.

IF THERE IS ANY PROBLEM RECEIVING THIS MESSAGE,  
PLEASE CALL 662-842-7907 AND ASK FOR OLIVIA D. WARD.  
FACSIMILE • 662-842-3873

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Longfellow, LLC  
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:

Gregory D. Pirkle, Esq.  
Name of Person

Phelps Dunbar LLP  
Firm/Company

P.O. Box 1220  
Address

Tupelo, MS 38802  
City/State and Zip Code

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Greg Pirkle at ( 662 ) 842-7907  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee    ☐ \$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 Circle  
Tallahassee, FL 32301

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name:**

The name of the Limited Liability Company is:

**Longfellow Properties, 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:**

1372 CR 126  
New Albany, Mississippi 38652

**Mailing Address:**

1372 CR 126  
New Albany, Mississippi 38652

**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:

**Richard David Mitchell**

Name

**3600 South Longfellow Circle**

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

**Hollywood, FL 33021-4935**

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.*

**Richard D Mitchell**

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR

John Houston Mitchell, Sr.

1372 CR 126

New Albany, MS 38652

MGR

Carol Mitchell

1372 CR 126

New Albany, MS 38652

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**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.)

John Houston Mitchell, Sr.

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)**