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#### Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LAW OFFICE OF DANIEL C. PERRI

Account Number : I20040000119

Phone : (850)651-3011

Fax Number : (850)651-3306

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: gingerh108@cox:net

#### FLORIDA LIMITED LIABILITY CO.

#### Buena Tierra, LLC

Certificate of Status	θ
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

# ARTICLES OF ORGANIZATION BUENATIERRA, LLC

The undersigned subscribers hereby form a limited liability company under the laws of the State of Florida, Florida Statutes, Chapter 608 as follows:

### ARTICLE I

The name of this limited liability company shall be Buena Tierra, LLC.

#### ARTICLE II

This limited liability company shall exist no longer than thirty (30) years from the date of filing with the Department of State.

# ARTICLE III PURPOSE AND POWERS

This limited liability company is organized for the purpose of conducting any and all lawful business not in conflict with the Statutes of the State of Florida. This limited liability company shall have all powers enumerated in Chapter 608 mentioned above.

# ARTICLE IV PRINCIPAL OFFICE AND MAILING ADDRESS

The principal place of business of the limited liability company is at 1683 Vine Avenue, Niceville, Florida 32578. The mailing address of the limited liability company is 1683 Vine Avenue, Niceville, Florida 32578.

# ARTICLE V INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this limited liability company is 4 Eleventh Avenue. Suite One, Shalimar, Florida 32579 and the name of the initial registered agent at that address is DANIEL C. PERRI.

#### ARTICLE VI

The capital of the limited liability company that will be contributed shall be the sum of One Thousand Dollars (\$1,000.00).

#### ARTICLE YII MANAGEMENT

The name and address of the manager of the limited liability company is as follows:

ROBERT C. HARRISON 1683 Vine Avenue Niceville, Florida 32578

Management shall be by all persons or authorized representatives thereof above named, with majority vote controlling.

### ARTICLE VIII INITIAL MEMBERS

The names and addresses of the initial members of this limited liability company are as follows:

GINGER L. HARRISON 1683 Vine Avenue Niceville, Florida 32578 ROBERT C. HARRISONS 12 1683 Vine Avenue 1683 Vine Avenue Niceville, Florida 32578 SEE STATE OF STATE O

#### ARTICLE IX ADDITIONAL MEMBERS

The members of the limited liability company shall have the right to admit additional members upon unanimous written consent of all the members of the company existing at that time.

#### ARTICLE X DISSOLUTION

Upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of any member of this limited liability company or the occurrence of any other event which terminates the continued membership of a member of the limited liability company, the limited liability company shall be terminated unless the business is continued by the consent of all remaining members.

#### ARTICLE XI TRANSFER OF INTEREST

A member may transfer that member's right to receive shares of profits and returns of capital contributions, but may not assign any of the rights to participate in the management or to be a member of the limited liability company unless prior written consent is obtained by the transferor from all remaining members.

IN WITNESS WHEREOF, the undersigned, being the members hereinbefore named, have hereunto set their hand and seal on this the 8th day of March, 2012, for the purpose of forming a limited liability company to do business both within and without the State of Florida and do make and file in the Office of the Secretary of State of Florida these Articles of Organization and certify that the facts herein stated above are true.

**MEMBERS:** 

ROBERT C. HARRISON

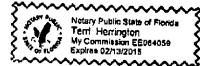
GINGER L. HARRISON

STATE OF FLORIDA COUNTY OF OKALOOSA

The foregoing instrument was executed and acknowledged before me this 8th day of March, 2012, by ROBERT C. HARRISON, who personally appeared, who is personally known to me or who produced a driver's license as identification and who did not take an oath.

WITNESS my hand and official seal in the State and County last aforesaid this 8th day of

March, 2012.



PERRI HEKRINGTON

Notary Public

My commission expires: 02/13/2015

STATE OF FLORIDA COUNTY OF OKALOOSA

The foregoing instrument was executed and acknowledged before me this 8th day of March, 2012, by GINGER L. HARRISON, who personally appeared, who is personally known to me or who produced a driver's license as identification and who did not take an oath.

WITNESS my hand and official scal in the State and County last aforesaid this 8th day of

March, 2012.

Notary Public State of Florida
Terri Harrington
My Commission 66064059
Expires 02/13/2015

TERRI HERRINGTON

Nøtary Public

My commission expires: 02/13/2015

#### CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

Pursuant to Section 608.415, Florida Statutes, the following is submitted: Buena Tierra, LLC, desiring to organize under the laws of the State of Florida with its principal place of business at 1683 Vine Avenue, Niceville, Florida 32578 has named **Daniel C. Perri** as its agent to accept service of process within the State of Florida and whose office address is 4 Eleventh Avenue, Suite One, Shalimar, Florida 32579.

**MEMBERS:** 

ROBERT C. HARRISON

GINGERAL, HARRISON

Having been named to accept service of process for the above named limited liability company, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all Florida Statutes relative to the proper and complete performance of my duties.

DANIEL C. PERRI

Registered Agent