

L12000045828

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

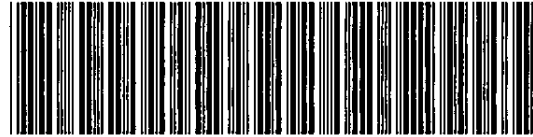
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

W1200004144

Office Use Only



300224179323

03/09/12--01025--004 \*\*185.00

FILED  
12 APR - 2 PM 3:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE

APR 03 2012

EXAMINER

EFFECTIVE DATE 04/01/12



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 12, 2012

SHAWN LIGHTFOOT  
14746 SW 41ST AVE. RD.  
OCALA, FL 34473

SUBJECT: CASE ELECTRIC LLC  
Ref. Number: W12000014144

We have received your document for CASE ELECTRIC LLC and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The converting Florida entity must be active on our records.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 112A0000908

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12 APR -2 PM 9:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: CASE ELECTRIC 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:

SHAWN LIGHTFOOT  
Name of Person

CASE ELECTRIC LLC  
Firm/Company

14746 SW 41 AVE RD  
Address

Ocala, FL 34473  
City/State and Zip Code

CASE ELECTRIC@YMAIL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SHAWN LIGHTFOOT at (352) 235-7920  
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

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TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

CASE ELECTRIC 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:

14746 SW 41 AVE RD  
OCALA, FL 34473

### Mailing Address:

14746 SW 41 AVE RD  
OCALA, FL 34473

## 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:

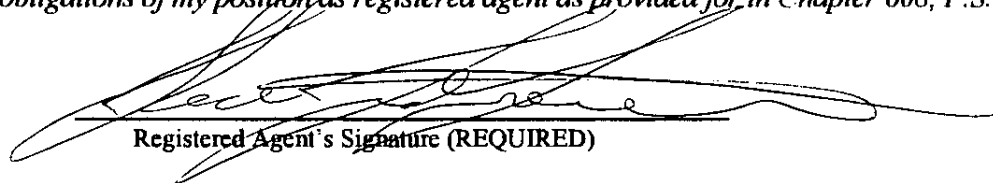
SHAWN LIGATFOOT  
Name

14746 SW 41 AVE RD  
Florida street address (P.O. Box **NOT** acceptable)

OCALA FL 34473  
City, State, and Zip

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

*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.*

  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

**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

MGR

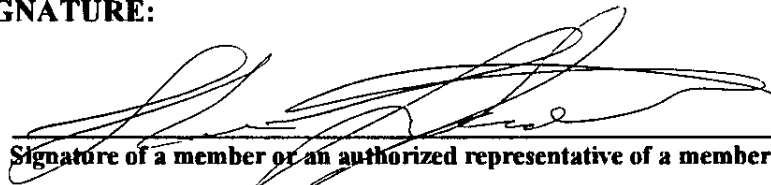
**Name and Address:**

SHAWN LIGHTFOOT  
14746 SW 41 AVE RD  
OCALA, FL 34473

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 4-1-12 (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.)

SHAWN LIGHTFOOT  
Typed or printed name of signee

FILED  
12 APR -2 PM 08 29  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

**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)