

212000057327

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

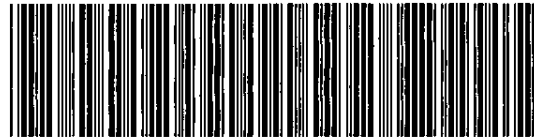
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APR 26 2012

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DIVISION OF CORPORATIONS
12 APR 26 PM 3:50

FILED
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DIVISION OF CORPORATIONS
12 APR 26 PM 4:50

ALLEN LAW, P.A.

Karla Carnes Allen, Esq.
kcallen@allenlawpa.com

Joseph T. McCormick III, Esq.
jtmccormick@allenlawpa.com

April 23, 2012

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

RE: Articles of Organization of South Atlantic Development Enterprises, LLC.

Dear Division of Corporations:

Enclosed please find the following documents:

1. Articles of Organization of South Atlantic Developers Enterprises, LLC;
2. Check in the amount of \$160.00 for the filing fees;
3. One self-addressed, stamped envelope.

If you require anything additional, please do not hesitate to contact this office.

Very truly yours,



Emily A. Harris, CP
Certified Paralegal

Encl: as stated above.

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CLERK OF THE
DIVISION OF CORPORATIONS
12 APR 25 PM 3:50

**ARTICLES OF ORGANIZATION
OF
SOUTH ATLANTIC DEVELOPMENT ENTERPRISES, LLC**

ARTICLE I - NAME

The name of the limited liability company is South Atlantic Development Enterprises, LLC, ("company").

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

2161 East County Rd. 540A
Suite 270
Lakeland, FL 33813

Mailing Address:

2161 East County Rd. 540A
Suite 270
Lakeland, FL 33813

**ARTICLE III - REGISTERED AGENT,
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE**

The name and the Florida street address of the registered agent are:

Joseph T. McCormick III
10019 Park Place Ave.
Riverview, Florida 33578

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..

Joseph T. McCormick III

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ARTICLE IV - MANAGERS OR MANAGING MEMBERS

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

Title:

"MGR" = Manager

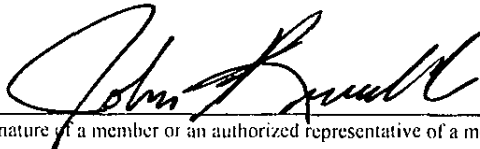
"MGMR" = Managing Member

Name and Address:

MGMR

John Skerchek
2161 East County Rd. 540A
Suite 270
Lakeland, FL 33813

REQUIRED SIGNATURE:

A handwritten signature in black ink, appearing to read "John Skerchek", is written over a horizontal line.

Signature of a member or an authorized representative of a member.

By: John Skerchek

(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.)