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D. BRUCE
JUN 25 2012
EXAMINER

DIVISION OF CORPORATION
12 JUN 22 PH 3: OF

\_EFFECTIVE DATE 04/19/12

## **COVER LETTER**

EIN# 45-5523351

†O: Registration Section
Division of Corporations

SUBJECT: Cowan Investment Properties, 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:		
Karen or Chad Cowan		
Name of Person		
Cowan Investment Properties, LLC		
Firm/Company		
6457 Hazeltine National Drive, Suite 145		
Address		
Orlando, FL 32822		
City/State and Zip Code		
karen@ductdetectives.com  E-mail address: (to be used for future annual report notification)		
	75	~DIV
For further information concerning this matter, please call:	JUN 2	25.5
Chad or Karen Cowan at (407 ) 243-6601	122	유기
Name of Person Area Code & Daytime Telephone Number	P#	
Enclosed is a check for the following amount:	3: 05	STATE
\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee & Certified Copy (additional copy is enclosed)	ee, us &	<b>3</b> 5 (

**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

	Limited Liability C	•	шс	
	vestment Pro	<u>'</u>	ty Company, "L.L.C.," or "LLC.")	<del></del>
ARTICLE II - A		ess of the pri	ncipal office of the Limited Liab	oility Company is
Principal Office	Address:		Mailing Address:	
6457 Hazeltine N Orlando, FL 3282	National Drive, Suite 22	e 145	6457 Hazeltine National Drive, Orlando, FL 32822	<u>Suite</u> 145
(The Limited Liability business entity with		s its own Registon.) ress of the re	Office, & Registered Agent's Sered Agent. You must designate an individue	ial or another 12 JUN 22
	Onad E. Oow	Name		<b>79</b> 58 70 00 00 00 00 00 00 00 00 00 00 00 00
	6457 Hazeltir	ne Nationa	al Drive, Suite 145	3: 05
	Flo	rida street add	ress (P.O. Box NOT acceptable)	SKO
	Orlando		FL 32822	
		City, Sta	te, and Zip	
liability com registered agent	pany at the place des and agree to act in	signated in th this capacity	ccept service of process for the ab his certificate, I hereby accept the I further agree to comply with the formance of my duties, and I am j	appointment as he provisions of al

Registered Agent's Signature (REQUIRED)

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

(CONTINUED)

\*CTIVE DATE **04/19/1**2

**ARTICLE I - Name:** 

Page 1 of 2

Title: "MGR" = Manager "MGRM" = Managin	Name and Address:  Member
"MGR"	Chad E. Cowan
	6457 Hazeltine National Drive, Suite 145 Orlando, FL 32822
	Orientes, F.E. OZOZZ
"MGR"	Karen Lynn Cowan
	6457 Hazeltine National Drive, Suite 145
-	Orlando, FL 32822
•	
	<del></del>
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(Use attachment if neo	essary)
ICLE V: Effective date,	f other than the date of filing: 06/19/2012 (OPTIONAL) he date must be specific and cannot be more than five business days pri
ICLE V: Effective date, effective date is listed, t	f other than the date of filing: 06/19/2012 . (OPTIONAL) he date must be specific and cannot be more than five business days prifiling.)
ICLE V: Effective date, effective date is listed, to go days after the date of REQUIRED SIGNA	f other than the date of filing: 06/19/2012 (OPTIONAL) he date must be specific and cannot be more than five business days prifiling.)  FURE:
ICLE V: Effective date, effective date is listed, to go days after the date of REQUIRED SIGNA	f other than the date of filing: 06/19/2012 (OPTIONAL) he date must be specific and cannot be more than five business days prifiling.)  FURE:  Hure of a member or an authorized representative of a member.
ICLE V: Effective date, effective date is listed, to go days after the date of REQUIRED SIGNA  (In accordance constitutes and I am aware the signal of the s	f other than the date of filing: 06/19/2012 (OPTIONAL) he date must be specific and cannot be more than five business days prifiling.)  FURE:
ICLE V: Effective date, effective date is listed, to 90 days after the date of  REQUIRED SIGNA  Gign  (In accordance constitutes and I am aware the constitutes a constitutes a	f other than the date of filing: 06/19/2012 (OPTIONAL)  he date must be specific and cannot be more than five business days prifiling.)  FURE:  with section 608.408(3), Florida Statutes, the execution of this document affirmation under the penalties of perjury that the facts stated herein are true. at any false information submitted in a document to the Department of State

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)