# 11200096587

(Re	equestor's Name)	,
(Ac	dress)	
(Ac	idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bi	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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G. MCLEOD JUL 2 6 2012

**EXAMINER** 



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LICKETARY OF STATE ALLAHASSEE, FLORIDA

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# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Skipper Cattle & Citrus LLC
(Name of Resulting Florida Limited Company)
The enclosed Certificate of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 608.439, F.S.
Please return all correspondence concerning this matter to:
J. Michael Swaine
(Contact Person)
Swaine & Harris, P.A.
(Firm/Company)
425 South Commerce Avenue
(Address)
Sebring, FL 33870-3702
(City, State and Zip Code)
terri@heartlandlaw.com
E-mail address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
Terri Watson at ( 863 ) 385-1549
(Name of Contact Person) (Area Code and Daytime Telephone Number)
Enclosed is a check for the following amount:
\$150.00 Filing Fees (\$25 for Conversion & Status  \$180.00 Filing Fees and Certified Copy  Status  \$185.00 Filing Fees Certified Copy  Certificate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Compa	my is:	
Skipper Cattle & Citrus LL		
(Must end with the words "Limite	d Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of	the principal office of the Limited Liabilit	ty Company is:
Principal Office Address:	Mailing Address:	
365 Moffitt Road	365 Moffitt Road	
Zolfo Springs, FL 33890	Zolfo Springs, FL 33890	
ARTICLE III - Registered Agent, Registered Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	stered Office, & Registered Agent's Sig n Registered Agent. You must designate an individual c	or another
The name and the Florida street address o	f the registered agent are:	# 14 JUL 23
Roland L. Skipper		AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA
	Name	, m < ,
365 Moffitt Ro	pad	OF ST
Florida str	reet address (P.O. Box NOT acceptable)	#

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 (REOURED)

 $\frac{\hbox{Zolfo Springs, FL}}{\hbox{City, State, and Zip}} \ \frac{\hbox{Zolfo Springs, FL}}{\hbox{City}}$ 

(CONTINUED)

Page 1 of 2

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

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

"MGR" = Manager "MGRM" = Managing Member		
MGRM	Roland L. Skipper	
	365 Moffitt Road	
	Zolfo Springs, FL 33890	
MGRM	. Carolyn P. Skipper	
	365 Moffitt Road	
	Zolfo Springs, FL 33890	
·		
(Use attachment if necessary)		
	e date of filing: (OP	
fective date is listed, the date must l days after the date of filing.)	be specific and cannot be more than five busin	iess da

### **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 penaltics 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.)

# Roland L. Skipper

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)