

L120000146738

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H12000274872 3)))



H120002748723ABC0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : HARPER, KYNES, GELLER, GREENLEAF & FRAYMAN, P.A.  
Account Number : 070651000745  
Phone : (727) 799-4840  
Fax Number : (727) 797-8206

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

Email Address: Claire@harperkynes.com

FLORIDA LIMITED LIABILITY CO.  
LSL Real Estate, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

RECEIVED

12 NOV 20 AM 10:17

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2012 NOV 20 AM 11:20

FILED

J. SAULSBERRY  
EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

NOV 21 2012

H12000274872 3

**ARTICLES OF ORGANIZATION FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - NAME**

The name of the Limited Liability Company is: LSL REAL ESTATE, LLC

**ARTICLE II - ADDRESS**

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

5410 HWY 540 WEST  
WINTER HAVEN FL 33880 US

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

P.O. BOX 1608  
LAKELAND FL 33802

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

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

LYNN HAMPTON  
5410 HWY 540 WEST  
WINTER HAVEN FL 33880 US

FILED  
2012 NOV 20 AM 11:20  
SECRETARY 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.

  
LYNN HAMPTON, Registered Agent

**ARTICLE IV - MANAGEMENT**

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager - managed company.

**ARTICLE V - MANAGERS**

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

H12000274872 3

H12000274872 3

Title:

Manager

Manager

Name and Address:

LYNN HAMPTON  
P.O. BOX 1608  
LAKELAND FL 33802

LEIGH HAMPTON  
P.O. BOX 1608  
LAKELAND FL 33802

  
\_\_\_\_\_  
LYNN HAMPTON, Manager

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.

LYNN HAMPTON  
Typed or printed name of signee

F:\CLIENTS\IL-Clients\LSL Real Estate, LLC\General Matters\Articles.doc

2012 NOV 20 AM 11:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

H12000274872 3