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Special Instructions to F	iling Officer:	
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FFR 2 2 2013

(850) 245-6051.

## COVER LETTER

TO: Registration S Division of Co			
SUBJECT: Schr	neider Farm L	LC	
SOBJECT.	Name of Limit	ted Liability Company	
The enclosed Articles o	f Organization and fee(s) are:	submitted for filing.	
	ondence concerning this matt	_	
	chneider	J	
1 0/19 0		Name of Person	
Schneid	der Farm LLC		
		Firm/Company	<del> </del>
7610 P	ine Forest Rd	•	
<del> ,</del>		Address	<del></del>
Walnut	Hill Fl. 32568	}	•
s300@fro	•	ty/State and Zip Code	
,	E-mail address: (to be used	for future annual report notification)	
For further information	concerning this matter, please	e call:	
Perry Schr	neider	$_{at}$ 850 $_{3240867}$	
Name	of Person	Area Code & Daytime Telephone Num	lber
Enclosed is a check for	or the following amount:		
■\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy Certific (additional copy is enclosed) Certific	Filing Fee, cate of Status & cd Copy all 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	



December 26, 2012

PERRY SCHNEIDER 7610 PINE FOREST ROAD WALNUT HILL, FL 32568

SUBJECT: SCHNEIDER FARM LLC

Ref. Number: W12000063317

We have received your document for SCHNEIDER FARM LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The word "Limited" may be abbreviated as "Ltd." andthe word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company", "L.C.", and "LC".

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.

Neysa Culligan Regulatory Specialist II

Letter Number: 512A00030297

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

/1.4		411-120-C	<del></del>
(Mt	ist end with the words "Limit	ted Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Ad	dress:		
The mailing address	ss and street address of	f the principal office of the Limited Liabil	ity Company is:
Principal Office A	Address:	Mailing Address:	
7610 Pine Forest Rd.		7610 Pine Forest Rd.	
Walnut Hill Fl. 32568		Walnut Hill Fl. 32568	
ARTICLE III - R	egistered Agent, Reg	istered Office, & Registered Agent's Signar Registered Agent You must designate an individual	gnature:
(The Limited Liability Co business entity with an	ompany cannot serve as its ov active Florida registration.) Florida street address o	ristered Office, & Registered Agent's Signant Registered Agent. You must designate an individual of the registered agent are:	or another
(The Limited Liability Co business entity with an	ompany cannot serve as its ov active Florida registration.)	wn Registered Agent. You must designate an individual of the registered agent are:	or another  SECRET
(The Limited Liability Co business entity with an	ompany cannot serve as its ov active Florida registration.) Florida street address o	wn Registered Agent. You must designate an individual	or another
(The Limited Liability Co business entity with an	ompany cannot serve as its ov active Florida registration.) Florida street address o	wn Registered Agent. You must designate an individual of the registered agent are:	or another  78 FEB 27  FILL  ALL  ALL  ALL  ALL  ALL  ALL  AL
(The Limited Liability Co business entity with an	ompany cannot serve as its ovactive Florida registration.) Florida street address of Perry Schneider 7610 Pine Forest Rd.	wn Registered Agent. You must designate an individual of the registered agent are:	FILEI  200 FEB 22  SECRETARY OF TALLAHASSEE
(The Limited Liability Co business entity with an	ompany cannot serve as its ovactive Florida registration.) Florida street address of Perry Schneider 7610 Pine Forest Rd.	wn Registered Agent. You must designate an individual of the registered agent are:  Name	TALLAHASSEE, FL

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)

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	Perry Schneider	
	7610 Pine Forest Rd.	
	Walnut Hill Fl. 32568	
<del>,</del>		
(Use attachment if necessary)		
LE V: Effective date, if other than	the date of filing: (6	OPTION.
	nust be specific and cannot be more than five	

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.)

Perry Schneider

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)