

✓  
**L13000119801**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

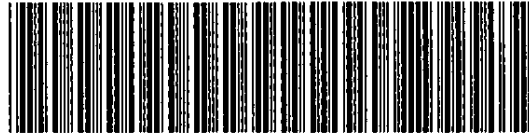
\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

W13-42524

Office Use Only



**500250074495**

07/29/13--01014--010 \*\*125.00

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2013 AUG 22 PM 4:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. BOSTICK

AUG 23 2013

EXAMINER

ANN S. ROGERS  
13800 Park Blvd.  
Seminole, FL 33776

August 20, 2013

ATTN: Gina McLeod  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

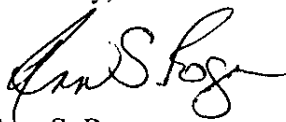
RE: Reference Number: W13000042524

Dear Ms. McLeod:

I have received the above-numbered letter and I choose to resubmit the document under the current name.

Enclosed are a copy of the original filing and a copy of the letter listed above.

Sincerely,



Ann S. Rogers

SECRET  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

2013 AUG 22 PM 4:33

FILED

(850) 245-6051.

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Palmetto Holding, 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:

**Ann S. Rogers**

Name of Person

**Palmetto Holding, LLC**

Firm/Company

**13800 Park Blvd.**

Address

**Seminole, FL 33776**

City/State and Zip Code

**ann@annrogers.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Ann S. Rogers**

Name of Person

at **(727) 458-7660**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)    ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional 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

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

Palmetto Holding, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

## ARTICLE II - Address:

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

### Principal Office Address:

13800 Park Blvd.

Seminole, FL 33776

### Mailing Address:

13800 Park Blvd.

Seminole, FL 33776

## ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Ann S. Rogers

Name

13800 Park Blvd.

Florida street address (P.O. Box **NOT** acceptable)

Seminole

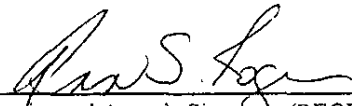
FL 33776

City, State, and Zip

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2013 AUG 22 PM 4:34

*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)

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

Ann S. Rogers

13800 Park Blvd

Seminole, FL 33776

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

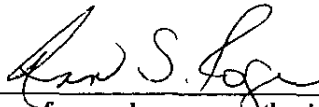
(Use attachment if necessary)

2013 AUG 22 PM 4:34  
CLERK OF COURT  
TALLAHASSEE, FLORIDA

FILED

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**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 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.)

Ann S. Rogers

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)



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 30, 2013

ANN S. ROGERS  
13800 PARK BLVD.  
SEMINOLE, FL 33776

SUBJECT: PALMETTO HOLDING, LLC  
Ref. Number: W13000042524

2013 AUG 22 PM 4:34  
RECEIVED  
TALLAHASSEE, FLORIDA

We have received your document for PALMETTO HOLDING, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is distinguishable on our records. However, the name is similar to a name already on file with this office. Therefore, the use of this name may result in future complications. The name of the existing entity is : PALMETTO HOLDINGS, LLC, document number L04000057451.

You may 1.) resubmit the document under the current name; or 2.) choose to file under another name. If you choose to file under another name, please make the appropriate correction throughout the document(s).

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.

Barbara Bostick  
Regulatory Specialist II

Letter Number: 813A00018329