# L13000155026

(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Dusiness Entry Name)					
(Danumant Number)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
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Effective Date 10/29/13

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SECRETARY OF STATE
AND SEFE FINANDA

NOV - 4 2013 T. MASA-1701:

### **COVER LETTER**

TO:	: Registration Section Division of Corporations						
	LP Enterprises, LLC.						
SUBJ	SUBJECT: Name of Limited Liability Company						
The e	nclosed Articles of Organization and fee(s) are submitted for filing.						
Please return all correspondence concerning this matter to the following:							
	Robert N. Hering Jr.						
	Name of Person						
	LP Enterprises, LLC.						
	Firm/Company						
	Bluiding 200, Suite#2, County Line Court						
	Address						
	Oakland, Florida 34787						
City/State and Zip Code bhering53@gmail.com							
E-mail address: (to be used for future annual report notification)							
For fu	rther information concerning this matter, please call:						
Robert N. Hering Jr. / Patricia A. Hering 321 229-4488 / 1757							
	Name of Person at ()  Area Code & Daytime Telephone Number						
Enclosed is a check for the following amount:							
□\$125	.00 Filing Fee U\$130.00 Filing Fee & Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)						
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301						



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

13 NOV - 1 PM 4: 00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

October 25, 2013

ROBERT N HERING JR BLDG 200 - STE 2 COUNTY LINE CT OAKLAND, FL 34787

SUBJECT: LP ENTERPRISES, LLC Ref. Number: W13000059568

We have received your document for LP ENTERPRISES, LLC and your check(s) totaling \$155.00. 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: L.P. ENTERPRISE, LLC, document number L04000085413.

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).

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of 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.

Tammy Hampton
Regulatory Specialist III
Registration/Qualification Section

Letter Number: 913A00024997

## Effective Date 10/22)13 ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:  LP Enterprises, LLC.					
					(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")
(Must end with the words "Lit	mod silesing company, distroit of silesing				
ARTICLE II - Address:	of the principal office of the Limited Liability Company is:  Mailing Address:				
ARTICLE II - Address: The mailing address and street address	of the principal office of the Limited Liability Company is:				
ARTICLE II - Address: The mailing address and street address  Principal Office Address:	of the principal office of the Limited Liability Company is:  Mailing Address:				

(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:

Robert N. Hering	Jr.
	Name
180 Nautica Mile	Drive
Florida	street address (P.O. Box NOT acceptable)
Clermont, Florida	34711 FL
	City, State, and Zip

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.

(CONTINUED)

Registered Agent's Signature (REQUIRE

Page 1 of 2

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2013 OCT 24 PM 4: 04
SECRETARY OF STATE

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>'''</u>	<u>itle:</u> MGR" = Manager MGRM" = Managing Member	Name and Address:	
<u>.</u>	1GR	Robert N Hering, Jr 180 Nautica Mile Drive Clermont, Florida 34711	
_	,		
_			
_			
J)	Jse attachment if necessary)		
(If an effe	E V: Effective date, if other than the datective date is listed, the date must be r 90 days after the date of filing.)	e of filing: October 22, 2013 specific and cannot be more	(OPTIONAL) than five business days
<u>R</u>	EQUIRED SIGNATURE:		
	Signature of a member or	an authorized representative of a m	ember.
	constitutes an affirmation under the	(3), Florida Statutes, the execution of the penalties of perjury that the facts stated in submitted in a document to the Department of the Department for in s.817.155, F.S.)	l herein are true.
	Robert N. Hering Jr.		
	Typed	or printed name of signee	201 SE
	Filing Fees:	-	20 20 20 20 20 20 20 20 20 20 20 20 20 2
	\$125.00 Filing Fee for Articles of Organiza of Registered Agent	tion and Designation	FILE 2013 OCT 24 PH SECRETARY OF TALL AHASSEE, F
	\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)		OF SI