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SECRETARY OF STATE
JAIL AHASSEE, FLORIDA

FEB 1 3 2014

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LINES, HINSON AND LINES

LAWYERS

121 NORTH MADISON STREET 32351
POST OFFICE BOX 550
QUINCY, FLORIDA 32353

WILLIAM D. LINES (1914 - 1992) ALEXANDER L HINSON BLUCHER B. LINES Telephone (850) 875-1300 Telecopier (850) 875-1350

February 11, 2014

Florida Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

RE: Woodward Farmhouse, LLC

To Whom It May Concern:

Enclosed please find for filing Articles of Organization and Designation of Resident Agent for Woodward Farmhouse, LLC. Also enclosed is our firm's check in the amount of \$155.00 for filing fee and one certified copy.

Thanking you for your assistance in this matter, I am,

Sincerely,

Alexander L. Hinson Lines, Hinson and Lines

ALH:kc

Enc.

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: WOODWARD FARMHOUSE, 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:
Alexander L. Hinson
Name of Person
Lines, Hinson & Lines Law Firm
Firm/Company
121 N. Madison Street
Address
Quincy, FL 32351
City/State and Zip Code
sgreg1941@aol.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Alexander L. Hinson 850 875-1300
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{S155.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \ \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY **ARTICLE I - Name:** The name of the Limited Liability Company is: WOODWARD FARMHOUSE, 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: **Mailing Address:** 1158 Woodward Rd 1158 Woodward Rd ... -Quincy, FL 32352 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: ALEXANDER L. HINSON Name 1350 Attapulgus Highway

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 605, F.S..

32352

Zip

Registered Agent's Signature (REQUIRED)

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

City

Quincy

(CONTINUED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager Member Manager	Julia W. Gregory 1158 Woodward Rd. Quincy, FL 32352
<u>Member</u>	Mary Woodward McNeill Declaration of Trust dated 10-31-1991 105 Haldane Drive, Southern Pines, NC 28
Member	Elizabeth W. Cook Revocable Trust dated 4-2-2013 9007 Autumn Lane, Pensacola, FL 32514
Member	Susan W. Walker 316 Watercress Drive
	Franklin, TN 37064
(Use attachment if necessary)	Franklin, TN 37064
LE V: Effective date, if other than the d	Franklin, TN 37064 late of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90 days after
LE V: Effective date, if other than the diffective date is listed, the date must be of filing.)	Franklin, TN 37064
LE V: Effective date, if other than the d ffective date is listed, the date must be of filing.) LE VI: Other provisions, if any. REQUIRED SIGNATURE:	Franklin, TN 37064 late of filing:
LE V: Effective date, if other than the d ffective date is listed, the date must be of filing.) LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation I am aware that any false	Franklin, TN 37064

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)