L14000034211

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Office Use Only



01/13/14--01011--005 **125.00

Effective Date 2/28/14

SECURETARY OF STATIONS
DIVISION OF CORPORATIONS
14 JAN 13 AM 9: 43

9/20 9/20

COVER LETTER

Division of Corporations
SUBJECT: Life's Gravelen LLC Name of Limited Liability Company
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:
Rick De Aquila Name of Person
Life's Garden Firm/Company
Firm/Company
3404 Brian Road South Address
Address
Palm Harbor FL 34685
City/State and Zip Code City/State and Zip Code City/State and Zip Code Comparison of the Compariso
For further information concerning this matter, please call:
To runder information concerning this matter, please can.
Rick De Aguila at (727) 804 6362 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status} \text{S155.00 Filing Fee & Certified Copy (additional copy is enclosed)} \$
Mailing Address Street/Courier Address 5

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 7, 2014

RICK DEAGUILA 3404 BRIAN RD S PALM HARBOR, FL 34685

SUBJECT: LIFE'S GARDEN LLC Ref. Number: W14000003828 SECRETARY OF STATENS
DIVISION OF CORPORATIONS
16 JAN 13 AM 9: 43

We have received your document for LIFE'S GARDEN 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):

You failed to make the correction(s) requested in our previous letter.

Pursuant to section 605.0207, F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on January 13, 2014. Please amend your document accordingly.

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) 245-6951.

JENNA D HARRIS Regulatory Specialist II

Letter Number: 614A00001308



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 21, 2014

RICK DEAGUILA 3404 BRIAN RD S PALM HARBOR, FL 34685

SUBJECT: LIFE'S GARDEN LLC Ref. Number: W14000003828 SECRE LARY OF STATE ON OF CORPORATIONS

We have received your document for LIFE'S GARDEN 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):

Pursuant to section 605.0207, F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on January 13, 2014. Please amend your document accordingly.

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) 245-6951.

JENNA D HARRIS Regulatory Specialist II

Letter Number: 614A00001308

Effective Date 2/28/14

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Lifes Garden 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;

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:

Rick De Aquila

3404 Brian Road South
Florida street address (P.O. Box NOT acceptable)

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.,

ed Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBR	Rick DeAquila.
	3104 Brian Road S.
AMBR	Cinden Defeuila
	1500 Rosemer Pood
	CHAIMAN TE 33 AS
<u> </u>	
(Use attachment if necessary)	2.28.14
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CLE V: Effective date, if other than the date effective date is listed, the date must be spee of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section of constitutes an affirmation under the constitutes an affirmation under the constitutes are affirmation under the constitutes	ecific and cannot be more than five business days prior to or 90 mber of an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document nder the penalties of perjury that the facts stated herein are true.
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CLE V: Effective date, if other than the date effective date is listed, the date must be spee of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section of constitutes an affirmation under that any false in constitutes a third degree fee	ecific and cannot be more than five business days prior to or 90 mber of an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document nder the penalties of perjury that the facts stated herein are true. If ormation submitted in a document to the Department of State

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)

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