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(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAR 25 2013

T. HAMPTON

12-31-14

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Snowpoppy Enterprises, 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:

Joanne Borgersen  
Name of Person

Prince Legal  
Firm/Company

25300 Forest Oaks Court  
Address

Leesburg, Florida 34748  
City/State and Zip Code

chall@bcnlawfirm.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carol Hall at ( 352 ) 394-2103  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |   |   |   |
|--|---|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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



BOYETTE  
CUMMINS  
& NAILOS  
ATTORNEYS AT LAW

K. WADE BOYETTE, JR.  
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CHELSEA M. LADD  
AILEEN R. MAZANETZ  
BRIAN M. MONK  
HEATH B. NAILOS  
KRISTIN CUMMINS NAILOS

February 20, 2014

Division of Corporations  
DEPARTMENT OF STATE  
Post Office Box 6327  
Tallahassee, FL 32314

RE: SNOWPOPPY ENTERPRISES, LLC

Dear Ladies or Gentlemen:

Enclosed please find the original and one copy of the Articles of Organization for the above-named limited liability company, the original of which is to be filed with your office. Enclosed is my check in the sum of \$155.00 to cover the cost of filing the Articles as follows:

1.	Filing Fee:	\$ 100.00
2.	Certified Copy:	30.00
3.	Registered Agent Designation:	<u>\$ 25.00</u>
TOTAL		\$ 155.00

Please certify the enclosed copy and return same to our office.

Should you have any questions, please do not hesitate to contact me.

Sincerely,

A handwritten signature in cursive script that reads "Carol Hall".

CAROL HALL  
Legal Assistant to  
NORMAN C. CUMMINS

/cfh

Enclosures  
CAROL/LLC FILE LTR



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 25, 2014

CAROL HALL, LEGAL ASSISTANT  
BOYETTE CUMMINS & NAILOS  
1635 E HWY 50 - STE 300  
CLERMONT, FL 34711

SUBJECT: SNOWPOPPY ENTERPRISES, LLC  
Ref. Number: W14000012315

We have received your document for SNOWPOPPY 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):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

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.

Tammy Hampton  
Regulatory Specialist III

Letter Number: 614A00004197

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Snowpoppy Enterprises, 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:

25300 Forest Oaks Court  
Leesburg, Florida 34748

25300 Forest Oaks Court  
Leesburg, Florida 34748

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:

Joanne Borgersen

Name

25300 Forest Oaks Court

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

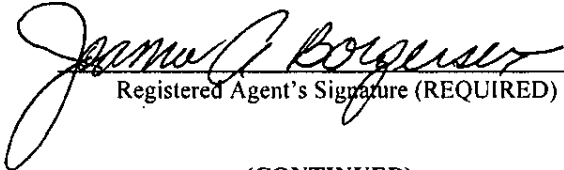
Leesburg

FL 34748

City

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 605, F.S.*

  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

MGR

**Name and Address:**

Joanne Borgersen

25300 Forest Oaks Court

Leesburg, Florida 34748

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Use attachment if necessary)


**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.)

**ARTICLE VI:** Other provisions, if any.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REQUIRED SIGNATURE:**



Signature of a member or an authorized representative of a member.  
(In accordance with section 605.0203 (1) (b), 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.)

Joanne Borgersen

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)

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