L15000067414

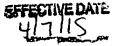
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT I	MAIL
(Business Entity Name)	
(Document Number)	
·	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
	,

Office Use Only



800269142108

03/09/15--01015--004 **125.00



2015 AFR 10 PH 3: 21



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 23, 2015

JULIE SYMONDS 7900 LAKE DAWN DRIVE WINTER PARK, FL 32792

SUBJECT: LIVE OAKS INVESTMENTS, LLC

Ref. Number: W15000020170

We have received your document for LIVE OAKS INVESTMENTS, 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 unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

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.

Neysa Culligan Regulatory Specialist II S APR 10 AH 10: 00

Letter Number: 015A00005774

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJI	ECT: <u>Live Oaks Property Investrr</u> Name	ents, LLC of Limited Liabi	lity Company	
The en	closed Articles of Organization and fo	e(s) are submitte	d for filing.	
Please	return all correspondence concerning	this matter to the	following:	
	Julie Symonds	Name o	f Person	
	Live Oaks Property Investme			
		rimi/C	ompany	
	7900 Lake Dawn Drive			
		Add	ress	
	Winter Park, FL 32792			
		City/State a	nd Zip Code	
ja	symonds@yahoo.com E-mail address: (to	ne used for futur	e annual report notifica	ation)
For fiv	ther information concerning this matt			,
i oi igi	mer mormation concerning and made	a, picase can.		
Julie :		at (407		····
	Name of Person	Area Co	de Daytime Te	lephone Number
Enclos	ed is a check for the following amour	::		
☑ \$ 125.0	00 Filing Fee	tus Certif	.00 Filing Fee & fied Copy nal copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address		Street/Courier Add	ress
	Registration Section Division of Corporations		Registration Section	ions
	P.O. Box 6327		Division of Corporat Clifton Building	IUHS
	Taliahassee, FL 32314		2661 Executive Cent	ter Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nat The name of the L	me: imited Liability Company is:				
Live Oaks Prope	erty Investments, LLC (Must end with the words "L	imited Liability Company, "L.L.C.," or "LLC.")			
ARTICLE II - Ac The mailing addre		cipal office of the Limited Liability Company is:			
Principal Office A	Address:	Mailing Address:			
	n Drive	7900 Lake Dawn Drive Winter Park FL 32792	<u> </u>		
(The Limited Liab another business e	illity Company cannot serve as it entity with an active Florida regis Florida street address of the regi	,	dividual or	2015 AFR	71
	Julie Symonds	Name		0	F
	7900 Lake Dawn Drive Florida street address (P.O	D. Box <u>NOT</u> acceptable)		P# 33	J
	Winter Park	FL 32792	ぎ切り	21	
the place desig capacity. I furth	gnated in this certificate, I hereby her agree to comply with the provi and I am familiar with and accept t	Zip sept service of process for the above stated limited lid accept the appointment as registered agent and agrisions of all statutes relating to the proper and complete obligations of my position as registered agent as Chapter 605, F.S Signature (REQUIRED)	ee to act in lete perforn	this nance	t

(CONTINUED)

Page 1 of 2

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	Julie Symonds
	7900 Lake Dawn Drive Winter Park, FL 32792
	Willer Fair, FL 32192
AMBR	David Symonds
	7900 Lake Dawn Drive
	Winter Park, FL 32792
	of filing: 7 th April 2015 . (OPTIONAL) sific and cannot be more than five business days prior to or 90
E V: Effective date, if other than the date of ective date is listed, the date must be specifiling.) E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a mem (In accordance with section 605)	Diffic and cannot be more than five business days prior to or 90 solutions of a member.
E V: Effective date, if other than the date of ective date is listed, the date must be special filing.) E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a mem (In accordance with section 605, constitutes an affirmation under 1 am aware that any false inform	Lific and cannot be more than five business days prior to or 90
E V: Effective date, if other than the date of ective date is listed, the date must be specifiling.) E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a mem (In accordance with section 605, constitutes an affirmation under 1 am aware that any false inform constitutes a third degree felony. Julie Symonds	nber or an authorized representative of a member. .0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. .ation submitted in a document to the Department of State as provided for in s.817.155, F.S.)
E V: Effective date, if other than the date of ective date is listed, the date must be specifiling.) E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a mem (In accordance with section 605, constitutes an affirmation under 1 am aware that any false inform constitutes a third degree felony. Julie Symonds	nber or an authorized representative of a member. 1.0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. 1.0203 table and the document to the Department of State