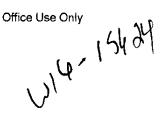
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	equestor's Name)	
(170	equestors Name)	
(Ad	ldress)	
	,	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
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(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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APR 08 2016 S. GILBERT

## COVER LETTER

	Division of Corporations			
CHIDIEC	Fountain Lake Properties LLC			
SUBJEC	T:Name	of Limited Liabil	ity Company	
The enclo	osed Articles of Organization and fee	e(s) are submitted	for filing.	
Please ret	urn all correspondence concerning t	his matter to the 1	following:	
	John Gibson			
		Name of	Person	· · · · · · · · · · · · · · · · · · ·
	Fountain Lake Properties LLC			
		Firm/Co	mpany	0.0000
	3257 Triton Ct.			
		Addr	ess	
	The Villages, FL 32163			
	jgandjg@hotmail.com	City/State an	d Zip Code	
	E-mail address: (to be	used for future a	nnual report notificati	ion)
For further	information concerning this matter,	please call:		
	John Gibson	816 at (	697-5000 .)	
	Name of Person	Area Code	Daytime Telephon	
Enclosed	is a check for the following amount:			
\$125.00 I	Filing Fee \$130.00 Filing Fee Certificate of State	ıs ——Certific	0 Filing Fee & Ed Copy al copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address  New Filing Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314		Street Address New Filing Section Division of Corporati Clifton Building 2661 Executive Cente Tallahassee, FL 3230	er Circle



March 21, 2016

JOHN M. GIBSON 3257 TRITON CT THE VILLAGES, FL 32163

SUBJECT: FOUNTAIN LAKE PROPERTIES, LLC

Ref. Number: W16000015624

We have received your document for FOUNTAIN LAKE PROPERTIES, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your first page of your Articles of Organization was not enclosed...

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) 245-6052.

Sylvia Gilbert Regulatory Specialist II New Filing Section

Letter Number: 616A00004385

www.sunbiz.org

## COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJEC	Fountain Lake Properties LLC			
BODJE		of Limited Liab	ility Company	
The encl	losed Articles of Organization and fee	e(s) are submitte	d for filing.	
Please re	eturn all correspondence concerning t	his matter to the	following:	
	John Gibson			
		Name o	f Person	<del>.</del>
	Fountain Lake Properties LLC			
		Firm/C	ompany	
	3257 Triton Ct.			
		Ado	ress	
	The Villages, FL 32163			
	jgandjg@hotmail.com	City/State a	nd Zip Code	<del></del>
		used for future	annual report notification)	<del></del>
For further	r information concerning this matter,	please call:		
	John Gibson	816	697-5000	
	Name of Person	at ( Area Code	Daytime Telephone Number	
Enclosed	l is a check for the following amount:			
	Filing Fee \$130.00 Filing Fee Certificate of State	& S155	00 Filing Fee & \$160.00 Filing Fee & Certificate of	f Status & py
	Mailing Address		Street Address	
	New Filing Section Division of Corporations		New Filing Section Division of Corporations	
	P.O. Box 6327		Clifton Building	
	Tallahassee, FL 32314		2661 Executive Center Circle	

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

KTICLE I - Name: e name of the Limited Lia	hilit. Commons in		
aname of the funded ris	omty Company is:		16 Apr "
Fountain Lake Pr	roperties LLC		16 APR - 7
	end with the words "Limited 1	Liability Compan	ny, "L.L.C.," or "LLC.")
THE REPORT OF THE PARTY OF THE			
TICLE II - Address: e mailing address and stre	et address of the principal of	rice of the Limite	d Liability Company is:
<u>Prin</u>	ncipal Office Address:		Mailing Address:
		324	57 Triton Ct.
3257 Triton Ct.			
The Villages, FL  TICLE III - Registered e Limited Liability Comp	Agent, Registered Office, &	Registered Age	e Villages, FL 32163  ent's Signature: . You must designate an individual or
The Villages, FL  TICLE III - Registered the Limited Liability Computer business entity with	Agent, Registered Office, & cany cannot serve as its own F an active Florida registration reet address of the registered a	Registered Agent.	ent's Signature:
The Villages, FL  TICLE III - Registered the Limited Liability Compather business entity with	Agent, Registered Office, & pany cannot serve as its own F an active Florida registration reet address of the registered a John M. Gibson	Registered Agent.	ent's Signature:
The Villages, FL  TICLE III - Registered the Limited Liability Compther business entity with	Agent, Registered Office, & pany cannot serve as its own F an active Florida registration reet address of the registered a John M. Gibson	Registered Agent) agent are:	ent's Signature:
The Villages, FL  TICLE III - Registered ne Limited Liability Comp other business entity with	Agent, Registered Office, & pany cannot serve as its own F an active Florida registration reet address of the registered a John M. Gibson	Registered Agent) agent are:	ent's Signature: . You must designate an individual or
The Villages, FL  RTICLE III - Registered the Limited Liability Compother business entity with	Agent, Registered Office, & pany cannot serve as its own F an active Florida registration reet address of the registered a John M. Gibson  3257 Triton Ct.	Registered Agent) agent are:	ent's Signature: . You must designate an individual or

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..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

litle:	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager MGR	JG & JG Enterprises Inc
	3257 Triton Ct.
	The Villages, FL 32163
AMBR	JG & JG Enterprises Inc.
	3257 Triton Ct.
	The Villages, Fl 32163
AMBR	Andrews Enterprises LLC
	13986 Royal Pointe Dr
	Port Charlotte, FL 33953
ctive date is listed, the date must be s	te of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90 d
V: Effective date, if other than the dative date is listed, the date must be so filing.)	pecific and cannot be more than five business days prior to or 90 d meet the applicable statutory filing requirements, this date will not be
V: Effective date, if other than the dative date is listed, the date must be sifiling.) the date inserted in this block does not ent's effective date on the Department VI: Other provisions, if any.  REOUIRED SIGNATURE:	specific and cannot be more than five business days prior to or 90 days meet the applicable statutory filing requirements, this date will not but of State's records.
V: Effective date, if other than the dative date is listed, the date must be significant.  This document is exectly a may be signature of a may be signature.	pecific and cannot be more than five business days prior to or 90 d meet the applicable statutory filing requirements, this date will not be
V: Effective date, if other than the dative date is listed, the date must be stilling.) The date inserted in this block does not ent's effective date on the Department VI: Other provisions, if any.  EOUIRED SIGNATURE:  Signature of a man This document is exect I am aware that any fall	meet the applicable statutory filing requirements, this date will not but of State's records.  member or an authorized representative of a member.  uted in accordance with section 605.0203 (1) (b), Florida Statutes, se information submitted in a document to the Department of State ee felony as provided for in s.817.155, F.S.

ARTICLE IV-

Page 2 of 2

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)