

Apr. 13. 2016 10:04AM

No. 0277 Pa. 1 of 2

L16000072085

Florida Department of State
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**FLORIDA LIMITED LIABILITY CO.
LISA D. SIMPSON, LLC**

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**ARTICLES OF ORGANIZATION
FOR
LISA D. SIMPSON, LLC,
A Florida Limited Liability Company**

FILE
SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 APR 13 PM 12:25

The undersigned, desiring to form a limited liability company under and pursuant to Chapter 605, Florida Statutes, the Florida Limited Liability Company Act, does hereby adopt the following Articles of Organization for such Company:

ARTICLE I

Name

The name of this Company shall be *LISA D. SIMPSON, LLC*.

ARTICLE II

Duration

The term of existence of the Company shall commence upon the filing of these Articles of Organization and shall be perpetual.

ARTICLE III

Mailing Address

The mailing address of the Company is Post Office Box 561, Lake Hamilton, Florida 33851. The street address of the Company is 228 Omaha Street, Lake Hamilton, Florida 33851.

ARTICLE IV

Registered Agent and Office

The name and street address of the initial registered agent and office for this Company is as follows: **Cellisa D. Simpson, 228 Omaha Street, Lake Hamilton, Florida 33851.**

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ARTICLE V
Management by Members

The Company will be managed by its Member(s).

ARTICLE VI
Operating Agreement of Company

The power to adopt, alter, amend or repeal the Operating Agreement of the Company shall be vested in the Member(s).

ARTICLE VII
Informal Action of Members

Any action of the Member(s) may be taken without a meeting if consent in writing setting forth the action so taken shall be signed by all Members who would be entitled to vote upon such action at a meeting and filed with the Company as part of its records.

ARTICLE VIII
Transferability of Member's Interest

An interest of a Member of this Company may be transferred or assigned only to such extent and in the manner provided in the Operating Agreement.

IN WITNESS WHEREOF, the undersigned has hereunto set her hand this 12 day of April, 2016.



CELISA D. SIMPSON

Apr. 13. 2016 10:05AM

No. 0277 P. 4

(H16000091715 3)

STATE OF FLORIDA
COUNTY OF POLK

The foregoing instrument was acknowledged before me this 12th day of April, 2016, by
CELISA D. SIMPSON, who [☒] is personally known to me or [☐] produced
as identification.

(SEAL)


NOTARY PUBLIC

Print Name of Notary
My Commission Expires



(H16000091715 3)

STATEMENT OF REGISTERED AGENT

Having been named as Registered Agent and to accept service of process for **LISA D. SIMPSON, LLC, a Florida limited liability company**, 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 in Chapter 605, Florida Statutes.


CELISA D. SIMPSON

STATE OF FLORIDA
COUNTY OF POLK

The foregoing instrument was acknowledged before me this 12th day of April, 2016, by **CELISA D. SIMPSON**, who [☒] is personally known to me or [☐] produced _____ as identification.

(SEAL)


NOTARY PUBLIC

Print Name of Notary

My Commission Expires:



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