

C170001284136

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

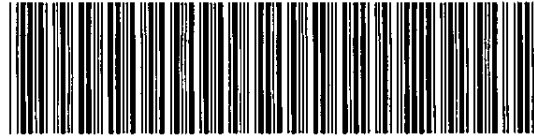
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer

Office Use Only



100299979041

06/14/17--01001--005 \*\*155.00

17 JUN 13 PM 3:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2017 JUN 13 PM 3:39

RECEIVED

M. MOON  
JUN 13 2017

# AUSLEY McMULLEN

ATTORNEYS AND COUNSELORS AT LAW

123 SOUTH CALHOUN STREET  
P.O. BOX 391 (ZIP 32302)  
TALLAHASSEE, FLORIDA 32301  
(850) 224 9115 FAX (850) 222-7560  
Writer's Direct Line: (850) 425-5457

June 13, 2017

Secretary of State  
2661 Executive Center Circle West  
Tallahassee, Florida 32301

**VIA HAND DELIVERY**

Re: **Skinny Pines, LLC**

Dear Madam/Sir:

Enclosed are an original and one copy of the Articles of Organization for **Skinny Pines, LLC**, a limited liability company. These Articles include Registered Agent and Registered Office designation for this company. Also enclosed is our check in the amount of:

☐ \$125.00  
Filing Fee

☐ \$130.00  
Filing Fee &  
Certificate of Status


☒ \$155.00  
Filing Fee &  
Certified Copy  
(additional copy enclosed)

☐ \$160.00  
Filing Fee,  
Certified Copy &  
Certificate of Status  
(additional copy enclosed)

Please do not hesitate to call me at (850) 425-5457 if you have any questions. We will have our messenger return to pick up the certified copy and the certificate of filing.

Thank you in advance for your usual assistance in these matters.

Sincerely,

  
Donna Marie Walters, FRP  
Florida Registered Paralegal

/dmw  
Enclosures  
sos ltr 20170613 sp ltr arts

**ARTICLES OF ORGANIZATION  
OF  
SKINNY PINES, LLC**

The undersigned, pursuant to the provisions of Chapter 605, Florida Statutes, provides the following information for the purpose of forming a Limited Liability Company under the laws of the State of Florida.

**ARTICLE 1.  
Name**

The name of the Limited Liability Company is **Skinny Pines, LLC.**

**ARTICLE 2.  
Address**

The street and mailing address of the place of business in Florida is:

534 Mangum-Close Road  
Perry, Florida 32347

**ARTICLE 3.  
Registered Agent and Registered Office**

The name and Florida street address of the initial registered agent in Florida for the Limited Liability Company are:

**David Alan Roberts**  
534 Mangum-Close Road  
Perry, Florida 32347

*Having been named as registered agent and as the person to accept service of process for the above-stated limited liability company at the place designated in these Articles, 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, Florida Statutes.*

s/David Alan Roberts  
**David Alan Roberts, Registered Agent**

**ARTICLE 4.  
Management**

The Limited Liability Company shall be managed by a Manager and is, therefore, a Manager-managed company. The name and address of the initial Manager are as follows:

**David Alan Roberts, Manager**

534 Mangum-Close Road  
Perry, Florida 32347

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 13th day of June, 2017.

***In accordance with Section 605.0203(1)(b), F.S., the execution of this document constitutes an affirmation under 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 Section 817.155, F.S.***

s/David Alan Roberts

David Alan Roberts, Member

17 JUN 17 PM 6:44  
STATE