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PICK-UP WAIT	MAIL
(Business Entity Name)	
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Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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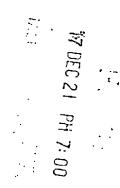
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REP. WILL



COVER LETTER

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	ew Filing Section vision of Corporations		
SUBJECT	Pecan Acres, LLC		
30031.01		Limited Liabili	ty Company
The enclose	ed Articles of Organization and fee(s) are submitted	for filing.
Please retur	m all correspondence concerning this	matter to the fe	ollowing:
	Whitney Thorne, Legal Assistant		
		Name of	Person
	Law Offices of Scott L. Soelberg, P	.C.	
		Firm/Co	прапу
	837 East 1200 South		
		Addre	ess
	Orem, UT 84097		
j	pbfec1@gmail.com	City/State and	d Zip Code
-	E-mail address: (to be u	sed for future a	nnual report notification)
For further in	nformation concerning this matter, pl	ease call;	
	Chris B. Turner	801	494-8494
	Name of Person	`	Daytime Telephone Number
Enclosed is	a check for the following amount:		
\$125.00 Fi	ling Fee S130.00 Filing Fee & Certificate of Status	Certifi	of Filing Fee & S160.00 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 Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE'I - Name:

The name of the Limited Liability Company is:

(Must c	contain the words "Limited Lis	ability Company, '	'L.L.C.," or "LLC.")	
ARTICLE II - Address:				
The mailing address and stre	et address of the principal offi	ce of the Limited	Liability Company is:	
<u>Prin</u>	cipal Office Address:		Mailing Address:	
16120 Mellen La	ne	1612	0 Mellen Lane	
Jupiter, FL 33478	3	Jupit	er, FL 33478	
another business entity with			ou must designate an individual or	<u></u> r
The name and the Florida str	-			7 DE (
The name and the Florida str	eet address of the registered a			17 DEC 2
The name and the Florida str	eet address of the registered a	gent are:		7 DEC 21
The name and the Florida str	eet address of the registered a			21
The name and the Florida str	eet address of the registered a	gent are:		21 PH
The name and the Florida str	James E. Harris	gent are: Name	ceptable)	21 PH 7:
The name and the Florida str	James E. Harris 16120 Mellen Lane	gent are: Name	ceptable)	21 PH

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..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

<u>Title:</u>		Name and Address:
	athorized Member	
"MGR" = Mai	nager	I P. H.
MGR_		James E. Harris 16120 Mellen Lane
		Jupiter, FL 33478
		34)1C1, 1 L 35476
MGR		Deborah F. Smolinski
		16120 Mellen Lane
		Jupiter, FL 33478
		
(Use attachme	nt if necessary)	
(Use attachme	nt if necessary)	
•	• •	filing: January 1, 2018 (OPTIONAL)
ICLE V: Effective	date, if other than the date of t	filing: January 1, 2018 . (OPTIONAL) The condition of th
ICLE V: Effective n effective date is l late of filing.)	e date, if other than the date of fisted, the date must be specifi	ic and cannot be more than five business days prior to or 90 days after
TCLE V: Effective n effective date is late of filing.) e: If the date insert	e date, if other than the date of tisted, the date must be specified in this block does not meet	ic and cannot be more than five business days prior to or 90 days after the applicable statutory filing requirements, this date will not be listed
TICLE V: Effective n effective date is late of filing.) e: If the date insert	e date, if other than the date of fisted, the date must be specifi	ic and cannot be more than five business days prior to or 90 days after t the applicable statutory filing requirements, this date will not be listed
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TCLE V: Effective n effective date is late of filing.) e: If the date insert document's effective TCLE VI: Other pr	e date, if other than the date of the isted, the date must be specificed in this block does not meet the date on the Department of Strovisions, if any. SIGNATURE: Signature of a membal This document is executed	ic and cannot be more than five business days prior to or 90 days after the applicable statutory filing requirements, this date will not be listed state's records.

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)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)

James E. Harris