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Florida Department of State
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To:

Division of Corporations
Fax Number : (850)617-6381

From:

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Account Number : I20030000100
Phone : (239)262-2211
Fax Number : (239)262-8330

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: j.vogel@vogel-law.net

**FLORIDA LIMITED LIABILITY CO.
LF Horses LLC**

| | |
|-----------------------|----------|
| Certificate of Status | 1 |
| Certified Copy | 0 |
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2019 JAN 17 10:12
TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION
OF
LF HORSES, LLC**

**ARTICLE I
NAME**

The name of the Limited Liability Company is: LF Horses, LLC.

**ARTICLE II
ADDRESS**

The mailing address and the street address of the principal office of the Limited Liability Company is:

661 Logan Blvd. N.
Naples, FL 34119

**ARTICLE III
DURATION**

The period of duration of the Limited Liability Company shall be perpetual or until dissolved in a manner provided by law or as provided in the regulations adopted by the members.

**ARTICLE IV
PURPOSE**

The purpose of the Company is to engage in any and/or all lawful business(es).

**ARTICLE V
MANAGEMENT**

The Limited Liability Company is to be managed by the Member and the name and address of the sole Member is:

Kristin Commers
661 Logan Blvd. N.
Naples, FL 34119

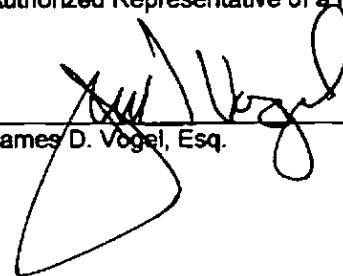
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These Articles are executed this 11th day of January, 2019, by an authorized representative of a Member of the Company, pursuant to Florida Limited Liability Company Act, Chapter 605.0203(1)(b), Florida Statutes. I am aware that any false information submitted in a document to the Dept. of State constitutes a third degree felony as provided for in s.817.155, F.S.

Authorized Representative of a Member:



James D. Vogel, Esq.

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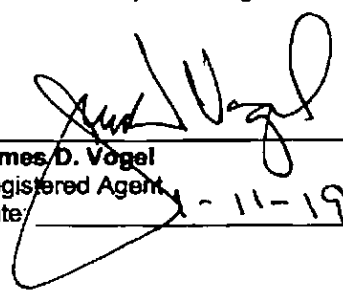
**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF CHAPTER 605, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED AGENT/REGISTERED OFFICE IN THE STATE OF FLORIDA:

1. The name of the Limited Liability Company is: LF Horses, LLC
2. The name and address of the registered agent and office is:

James D. Vogel
4099 Tamiami Trail North
Suite 200
Naples, Florida 34103

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.



James D. Vogel
Registered Agent
Date: 1-11-19

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