

L20000251892

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

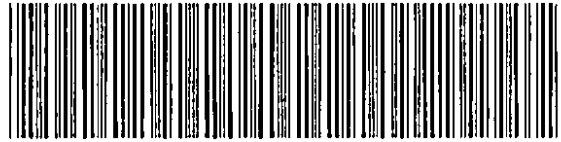
(Business Entity Name)

(Document Number)

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

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**Incorporating Services, Ltd.**

1540 Glenway Drive  
Tallahassee, FL 32301  
850.656.7956  
Fax: 850.656.7953  
www.incserv.com  
e-mail: accounting@incserv.com

**incserv**

**ORDER FORM**

**TO** Incorporating Services, Ltd.  
1540 Glenway Drive  
Tallahassee, FL 32301  
  
mstops@incserv.com  
850.656.7956  
850.656.7953

**FROM** Melissa Stops  
mstops@incserv.com  
850.656.7953

**REQUEST DATE** 8/25/2020

**PRIORITY** Routine

**OUR REF # (Order ID#)** 848549

**ORDER ENTITY**

GLOBE TROTTER EQUESTRIAN, LLC

**PLEASE PERFORM THE FOLLOWING SERVICES:**

**GLOBE TROTTER EQUESTRIAN, LLC (FL)**

Please file the attached articles and provide a certified copy as evidence.

**NOTES:**

\$155.00 Authorized

Email address for annual report reminders: radiv@incserv.com

**RETURN/FORWARDING INSTRUCTIONS:**

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,



20 AUG 25 PM 6:50  
ALSO SEE  
OFFICE OF  
CLERK

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Articles of Organization  
Of  
Globe Trotter Equestrian, LLC

*(Pursuant to Section 605.0201, Florida Statutes)*

1. The name of the Limited Liability Company is: **Globe Trotter Equestrian, LLC**
2. The street address of the principal office of the Limited Liability Company is:  
**1553 Trotter Ct., Wellington, FL 33414**
3. The mailing address of the Limited Liability Company is:  
**4225 Churchill Dr., Pleasanton, CA 94588**

4. The name and address of the registered agent is as follows:

**Incorporating Services, Ltd., 1540 Glenway Drive, Tallahassee, FL 32301**

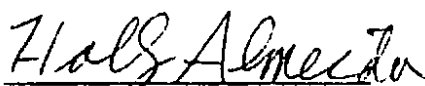
5. The period of duration for the Limited Liability Company shall be perpetual.
6. The name and address of the person(s) authorized to manage the LLC:

Title:        **AMBR**  
Name:     **Paul Beaudet**  
Address:   **4225 Churchill Dr., Pleasanton, CA 94588**

Title:        **AMBR**  
Name:     **Susan Conoby**  
Address:   **4225 Churchill Dr., Pleasanton, CA 94588**

In Witness Whereof, this document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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 s.817.155, F.S.

Dated: **August 24, 2020**

  
Holly Almeida  
Accumera LLC  
Authorized Representative

20 AUG 25 PM 6:50

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IN THE  
OFFICE OF THE  
CLERK OF THE  
DEPARTMENT OF  
STATE  
TALLAHASSEE, FLORIDA

Acceptance of Appointment as Registered Agent  
of •

**Globe Trotter Equestrian, LLC**

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 am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S

Dated: August 24, 2020



\_\_\_\_\_  
Incorporating Services, Ltd., Registered Agent