

11/6/2020

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : FOLEY & LARDNER
Account Number : I19980000047
Phone : (407)423-7656
Fax Number : (407)648-1743

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

Email Address: _____

FLORIDA LIMITED LIABILITY CO.
Grasslands West Management, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

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Corporate Filing Menu

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name:

The name of the limited liability company is Grasslands West Management, LLC

ARTICLE II – Address:

The mailing address and the street address of the principal office of the limited liability company is 3829 Progress Drive, Lakeland, FL 33811.

ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the company's registered agent are F & L Corp., One Independent Drive, Suite 1300, Jacksonville, Florida 32202.

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.

F & L CORP.

DocuSigned by:
Randolph J Wolfe
 By: 4A94B111EDCE4C8
 Randolph J. Wolfe, Vice President

ARTICLE IV: - The name, title and address of the persons authorized to manage and control the limited liability company are Daniel Green, Manager, 3829 Progress Drive, Lakeland, FL 33811 and Robert F. Harper, IV Manager, 3829 Progress Drive, Lakeland, FL 33811.

REQUIRED SIGNATURE:

DocuSigned by:
Stephen J. Szabo
 A327381E27D34A8

Signature of a member or an authorized representative of a member

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.

Stephen J. Szabo, III
 Typed or printed name of signer

FILING FEES:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
 \$30.00 Certified Copy (OPTIONAL)
 \$5.00 Certificate of Status (OPTIONAL)

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