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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : PYNE LAW GROUP Account Number : I20110000359 Phone : (850)215-9090

Fax Number : (850)215-9045

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

Email Address: LANKAPYNE @ PYNELAW GROUP, Lorn

FLORIDA LIMITED LIABILITY CO.

Piper's Landing FL LLC

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11. Stulm

COVER LETTER

	ew Filing Sec ivision of Co				
SUBJECT		ANDING FL LLC			
3000001	•	Name	of Limited Liah	ility Company	
The enclos	ed Articles of	Organization and fee	e(s) are submitte	d for filing.	
Please retu	m all correspo	ondence concerning t	his matter to the	following:	
	LAURA C. I	PYNE, ESQ.			
			Name o	of Person	
	PYNE LAW	GROUP P.A.			
		 	Firm/C	ompany	
	2309 FRAN	KFORD AVENUE,	SUITE A		
			Add	iress	
	PANAMA C	CITY, FLORIDA 324	05		
1	laurapyne@py	ynelawgroup com	City/State a	nd Zip Code	
-		_, <u>_</u>	used for future	annual report notificat	ion)
For further in	viformation co	ncerning this matter.	please call:		
	Laura CPyn		850 . at (215-9090	
	Nam	e of Person		Daytime Telephon	
Enclosed is	a check for the	he following amount:			
□S125.00	Filing Fee	■\$130.00 Filing F Certificate of State	us Certif	55.00 Filing Fee & fied Copy nal copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New Fi Divisio P.O. B	g Address iling Section on of Corporations ox 6327 ossee, FL 32314		Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Street Tallahassee, FL 3230	assec et, Suite 810

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2021 MAY 10 AM 11: 14

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

SECRETARY OF STATE FALLARY SEE, FL

Mailing Address:

PIPER'S	LA	NDI	NG	FΙ	LE	\boldsymbol{c}

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

12 W. Wimbledon Way	12 W. Wimbledon Way
Rogers, AR 72758	Rogers, AR 72758

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Principal Office Address:

Pvne Law Group, P.	A c/o Laura C. Pvne.	Esq.
	Name	
2309 Frankford Ave	nue, Suite A	
Florida street addres	s (P.O. Box <u>NOT</u> acc	eptable)
Panama City	Florida	32405
City	State	Zip

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 approvided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

	Name and Address:	
"AMBR" = Authorized "MGR" = Manager	Member	
MGR	Norris R. Roberts Jr.	
MOIC	12 W. Wimbledon Way	
	Rogers. AR 72758	
MGR	Karen L. Roberts	
1000	12 W. Wimbledon Wav	
	Rogers. AR 72758	
 		
(Use attachment if neces		
effective date, if or effective date is listed, the ate of filing.) If the date inserted in this ocument's effective date on	ther than the date of filing:	_
ICLE V: Effective date, if or effective date is listed, the ate of filing.) If the date inserted in this	ther than the date of filing:	_
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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)