

L22-006104552

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H220000956113)))



H220000956113ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : THOMAS K. BOARDMAN, P.A.
Account Number : 102350003270
Phone : (863)674-1027
Fax Number : (863)674-1029

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2022 MAR 14 AM 10:09

FILED

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

Email Address: KHALPIN3@ComCast.net

**FLORIDA LIMITED LIABILITY CO.
HALPIN RANCH, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

H22000095611 3

ARTICLES OF ORGANIZATION**OF****HALPIN RANCH, LLC**

The undersigned members hereby certify that the undersigned members of this organization desire to form a limited liability company under the laws of the State of Florida, providing for the formation, rights, privileges, and immunities of limited liability companies for profit. We further declare that the following Articles shall be the Charter and authority for the conduct of business of such limited liability company.

CHARTER**ARTICLE I****NAME**

The name of the limited liability company shall be HALPIN RANCH, LLC.

ARTICLE II

The mailing address and the street address of the principal office of this limited liability company is 28 Johnnycake Dr., Naples, Florida 34110.

ARTICLE III**DURATION**

This limited liability company shall exist until August 31, 2050, unless sooner dissolved in a manner provided by law or as provided in the regulations adopted by the members.

THIS DOCUMENT PREPARED BY:**Thomas K. Boardman****THOMAS K. BOARDMAN, P.A.****P.O. Box 2197****LaBelle, Florida 33975****(863) 674-1027****Florida Bar No. 103581**

FILED
2022 MAR 14 AM 10:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H22000095611 3

H22000095611 3

ARTICLE IV

MANAGEMENT

This limited liability company shall be managed by its members. The name and address of the Authorized Members are as follows:

James Halpin, Sr.
265 Indies Way, Unit 803
Naples, Florida 34110

Kelly Halpin
265 Indies Way, Unit 803
Naples, FL 34110

ARTICLE V

RESTRICTIONS ON MEMBERSHIP

Members shall have the right to admit new members by majority consent. Contributions required of new members shall be determined as of the time of admission to the limited liability company.

ARTICLE VI

MEMBERS' RIGHTS TO CONTINUE BUSINESS

Upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member, or the occurrence of any other event that terminates the continued membership of a member in the liability company, the remaining members shall have the right to continue the business upon the majority consent of such remaining members.

Executed by the undersigned at Naples, Florida, on March 10th, 2022.

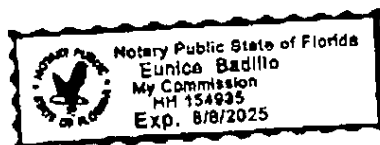
James Halpin Sr.
JAMES HALPIN, SR.

Kelly Halpin
KELLY HALPIN

STATE OF FLORIDA
COUNTY OF COLLIER

The foregoing instrument was sworn to and acknowledged before me by means of ☒ physical presence or ☐ online notarization, this 10th day of March, 2022, by JAMES HALPIN, SR., and KELLY HALPIN, who are ☐ personally known to me or ☐ who have produced

D/L as identification.



NOTARY PUBLIC

Name: Eunice Badillo

H22000095611 3

H22000095611 3

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: HALPIN RANCH, LLC
2. The name and address of the registered agent and office is:

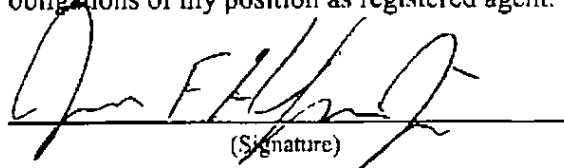
JAMES HALPIN, JR.
(Name)

28 Johnnycake Dr.
(P.O. Box not acceptable)

Naples, Florida 34110
(City/State/Zipcode)

FILED
2022 MAR 14 AM 10:08
CLERK OF STATE
TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above state corporation 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.


(Signature)

3/8/2022
(Date)

H22000095611 3