

L22 000 149685

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

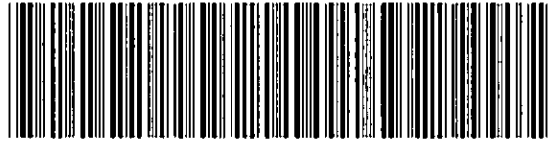
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2022 APR -8 AM 11:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FL

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 603651 9666A

AUTHORIZATION :

COST LIMIT : \$ 125.00



ORDER DATE : April 8, 2022

ORDER TIME : 10:27 AM

ORDER NO. : 603651-005

CUSTOMER NO: 9666A

DOMESTIC FILING

NAME: EQUESTRIAN POINTE LLC

EFFECTIVE DATE:

_____ ARTICLES OF INCORPORATION
_____ CERTIFICATE OF LIMITED PARTNERSHIP
XX _____ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland - EXT.

EXAMINER'S INITIALS: _____

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SECRETARY OF STATE
TALLAHASSEE, FL

**ARTICLES OF
ORGANIZATION FOR
EQUESTRIAN POINTE LLC,
A FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I.
NAME**

The name of the Limited Liability Company is "*Equestrian Pointe LLC*" (the "*Company*").

**ARTICLE II.
ADDRESS**

The mailing address and street address of the principal office of the Company is 7370 Sweetwater Branch, West Chester, Ohio 45069.

**ARTICLE III.
DURATION**

The period of duration for the Company shall be perpetual unless the Company is earlier dissolved in accordance with either the provisions of the *Florida Limited Liability Company Act*, Sections 605.0101 through 605.1108 of the *Florida Revised Statutes Annotated* (the "*Act*") or the Company's Operating Agreement among the members (the "*Operating Agreement*").

**ARTICLE IV.
MANAGEMENT**

The Limited Liability Company is to be managed by a Manager or Managers. The initial Manager shall be Lori Cole.

**ARTICLE V.
PURPOSE**

The purpose for which the Company is being organized is to acquire, improve, operate, develop, and lease real and personal property for use in boarding and training horses, and their riders, and to transact any other lawful business approved by the members of the Company and for which a limited liability company may be formed under the laws of the State of Florida.

**ARTICLES OF
ORGANIZATION FOR
EQUESTRIAN POINTE LLC, A FLORIDA
LIMITED LIABILITY COMPANY**

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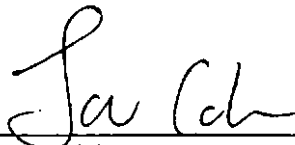
**ARTICLE VI.
MEMBERS' RIGHTS TO CONTINUE BUSINESS**

The right of the remaining members of the Company to continue the business on the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Company shall be upon the consent of all of the remaining members in accordance with the terms and conditions of the Operating Agreement to continue the business of the Company, provided that there is at least one (1) remaining member.

**ARTICLE VII.
AMENDMENTS**

The Company reserves the right to amend, alter, change or repeal any provision contained in these Articles of Organization, in the manner now or hereafter prescribed by the Act.

IN WITNESS WHEREOF, the undersigned, being an authorized representative of a Member of the Company, has hereunto set his hand this 7th day of April, 2022.



LORI COLE

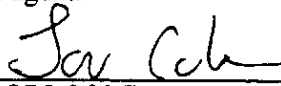
**CERTIFICATE OF DESIGNATION
OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0101 through 605.1108, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY 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: *Equestrian Pointe LLC*.
2. The name and address of the registered agent and office is:

Lori Cole
. 6785 NW 73rd Lane
Ocala, FL 34482

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.



LORI COLE

Date: 4/7, 2022.

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