

L23000149512

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

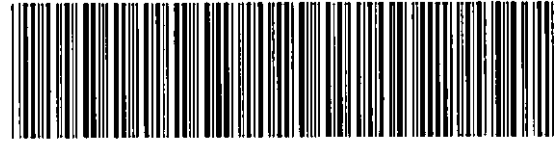
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



200404125442

2023 MAY 13 PM 1:13  
U.S. MAIL  
FORT LAUDERDALE, FL 33301

1-D



· WHITE, GRIFFIS & LITTELL, PLLC ·

VIRGINIA E. GRIFFIS  
CHARLES W. LITTELL  
RICHARD M. WHITE\*

JOHN L. DICKHAUS

\*BOARD CERTIFIED IN  
WILLS, TRUSTS & ESTATES

HAILE OFFICE  
5303 SW 91ST DRIVE, SUITE 200  
GAINESVILLE, FL 32608

METROCORP OFFICE  
3701 NW 40TH TERRACE, SUITE 1  
GAINESVILLE, FLORIDA 32606

WWW.WGL-LAW.COM

PHONE  
(352) 372-1011

HAILE FAX  
(352) 372-1023

METROCORP FAX  
(352) 451-4516

Direct Dial: 352.416.3484

Direct Fax: 352.416.3452

Email: jld@wgl-law.com

March 7, 2023

Florida Department of State  
Division of Corporations  
Limited Liability Companies (LLC)  
P.O. Box 6327  
Tallahassee, FL 32314

*Re: HLR Legacy, LLC*

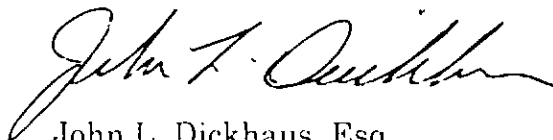
Dear Sir or Madam:

I have enclosed the Articles of Organization of HLR Legacy, LLC and a check payable to the Florida Department of State in the amount of \$125.00. Please process the registration of this new LLC in due course.

Thank you in advance for your assistance.

Very truly yours,

WHITE, GRIFFIS & LITTELL, PLLC



John L. Dickhaus, Esq.

Enclosures

2023 MAR 13 PM 1:13

STATE  
FLORIDA

LD

## Articles of Organization

### ARTICLES OF ORGANIZATION OF HLR LEGACY, LLC

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

#### ARTICLE I -Name:

The name of the Limited Liability Company is:

HLR LEGACY, LLC

#### ARTICLE II -Address:

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

7329 NW 172<sup>nd</sup> St.  
Alachua, Florida 32615

#### ARTICLE III -Registered Agent and Registered Office

The name and the Florida street address of the initial registered agent is :

Pamela N. McCranie  
7329 NW 172<sup>nd</sup> St.  
Alachua, Florida 32615

#### ARTICLE IV – Members/Managers

The name and address of each person authorized to manage and control the Limited Liability Company are:

<u>Title</u>	<u>Name and Address</u>
Member and Manager	Pamela N. McCranie 7329 NW 172 <sup>nd</sup> St. Alachua, Florida 32615
Member and Manager	Kathy J. Escoto 4346 King Valley Dr. Smyrna, GA 30082
Member and Manager	H. Keith Ragans 4138 Bill Carlton Rd. Perry, FL 32347

2023 MAY 13 PM 1:13  
FILED  
CLERK OF DISTRICT COURT  
JULIA A. HARRIS

IN WITNESS WHEREOF, we have signed these Articles of Organization as members and acknowledge them to be our acts on Mar 4, 2023, 2023.

Pamela M. McCranie  
Pamela M. McCranie, Mar 4, 2023, 11:13 AM

Pamela M. McCranie,  
Member and Manager

Kathy J. Escoto  
Kathy J. Escoto, Mar 4, 2023, 11:13 AM

Kathy J. Escoto,  
Member and Manager

H. Keith Ragans  
H. Keith Ragans, Mar 4, 2023, 11:13 AM

H. Keith Ragans,  
Member and Manager

In accordance with Section 605.0203(1)(b) and Section 605.0205(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. We are aware that any false information submitted in a document to the Department of State constitutes a third-degree felony as provided for in Section 817.155, Florida Statutes. We hereby authorize John Dickhaus of White, Griffiths & Littell, PLLC, as our representative, to file and deliver these Articles with the Florida Department of State.

Pamela M. McCranie  
Pamela M. McCranie, Mar 4, 2023, 11:13 AM

Pamela M. McCranie

Kathy J. Escoto  
Kathy J. Escoto, Mar 4, 2023, 11:13 AM

Kathy J. Escoto

H. Keith Ragans

H. Keith Ragans

2023 MAR 13 PM 1:13  
J. J. LITTELL  
FLO. DEPT. OF STATE

### STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

I hereby accept the appointment as registered agent and agree to act in this capacity. I agree to accept service of process for the above stated limited liability company at the place designated in this statement. 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 under Chapter 605, Florida Statutes.

In accordance with Section 605.0203(1)(b) and Section 605.0205(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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 Section 817.155, Florida Statutes.

Pamela N. McCranie  
Pamela N. McCranie, State # 00127811557

---

Pamela N. McCranie, Registered Agent

2023 MAR 13 PM 1:13  
STATE  
FLORIDA