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SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 APR 23 PM 12:00

*W07-18236
-cert*

BLT

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Arkansas Lakes, LLC
(Name of Limited Liability Company)

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

John Skeffington
(Name of Person)

Arkansas Lakes, LLC
(Firm/Company)

1655 Palm Beach Lakes Blvd, Ste 600
(Address)

WPB FL 33401
(City/State and Zip Code)

For further information concerning this matter, please call:

Leigh Aceti at (561) 686 4196
(Name of Person) (Area Code & Daytime Telephone Number)

MAILING ADDRESS:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 13, 2007

JOHN SKEFFINGTON
ARKANSAS LAKES, LLC
1655 PALM BEACH LAKES BLVD., STE. 600
WEST PALM BEACH, FL 33401

SUBJECT: ARKANSAS LAKES, LLC
Ref. Number: W07000018236

We have received your document for ARKANSAS LAKES, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper, that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6911.

Brenda Tadlock
Senior Section Administrator

Letter Number: 407A00025079

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. Arkansas Lakes, LLC
(Name of Foreign Limited Liability Company)
2. Arkansas
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 20-5896152
(FEI number, if applicable)
4. Nov. 13, 2006
(Date of Organization)
5. Perpetual
(Duration: Year limited liability company will cease to exist or "perpetual")
6. April 15 2007
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 1655 Palm Beach Lakes Blvd., Ste 600 Ste. 600
WPB, FL. 33401
(Street Address of Principal Office)

8. If limited liability company is a manager-managed company, check here ☐

9. The name and usual business addresses of the managing members or managers are as follows:

John Skeffington
408 North Arch
Sheridan, Ar. 72150

07 APR 23 PM 12:01
SECRETARY OF STATE
DIVISION OF CORPORATIONS

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: Any and all
lawful business.

Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

John Skeffington
Typed or printed name of signee

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

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Arkansas Lakes, LLC

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

John Skeffington
(Name)

1655 Palm Beach Lakes Blvd, Ste 600
Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

WPB FL 33401
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 as provided for in Chapter 608, Florida Statutes.


(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

FILED
STATE CLERK OF STATE
DIVISION OF CORPORATIONS
07 APR 23 PM 12:01



**Arkansas Secretary of State
Charlie Daniels**

State Capitol Building ♦ Little Rock, Arkansas 72201-1094 ♦ 501-682-3409

Certificate of Good Standing

I, Charlie Daniels, Secretary of State of the State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show

ARKANSAS LAKES, LLC

authorized to transact business in the State of Arkansas as a Limited Liability Company, filed Articles of Organization in this office November 13, 2006.

Our records reflect that said entity, having complied with all statutory requirements in the State of Arkansas, is qualified to transact business in this State.



In Testimony Whereof, I have hereunto set my hand and affixed my official Seal. Done at my office in the City of Little Rock, this 18th day of April 2007.



Charlie Daniels
Secretary of State

Online Certificate Authorization Code: 745c7c4e8bc0bc4

To verify the Authorization Code, visit sos.arkansas.gov