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PICK-UP WAIT MAIL	
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Certified Copies Certificates of Status	
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SECRETARY OF STATE



COVER LETTER

TO: Registration Se Division of Co		-			
SUBJECT: Seville	Quarter Orange Bead	ch. U.C			
SUBJECT:	(Name of Limite		oany)		_
i					
The enclosed Articles o	f Organization and fee(s) are s	ubmitted for filit	ig.		
Please return all corresp	ondence concerning this matte	er to the followin	g:		
John Hall					
	(Name of Person)			
SQOB - c/c	the Fish House				200
	(Firm/Company)			2006 APR 18 PM 4:
600 Barra	cks Street Suite 1	08			APR 18
		(Address)			- TP
Pensacola	a, Florida 32502				
		/State and Zip Coo	le)		
For further information	concerning this matter, please	call:			
John Hall		_{at (} 850	, 585-405	1	
(Name	of Person)		de & Daytime To	elephone Number)	_
Enclosed is a check for	or the following amount:				
☐ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 F Certified Cop (additional copy	•	\$160.00 Filin Certificate of Sta Certified Copy (additional copy is e	itus &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registra Division Clifton 1 2661 Ex	Courier Addression Section of Corporation Building ecutive Center see, FL 32301	ns Circle	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

SEVILLE	QUARTER	ORANGE	BEACH	LLC	

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

The name of the Limited Liability Company is:

ARTICLE I - Name:

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

Principal Office Address:		Mailing Ac	ddress:			
226 S. PALAFOX	6-th floor	600	BARRA	CKS	3250	# 108
PENSACOLA, FL. 3	2502	PENS	ACOLA,	FL.		= Z

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:

LAWFENCE C. SCHILL	2006 A	SEC.
276 S. PALAFOX, 6th FLOOR	PR 8	RETARY NOF 11
Florida street address (P.O. Box NOT acceptable) PENSACOLA FL 32562 City, State, and Zip	PM 4: 0	COF STATE

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, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:	P	Name and Address:	
"MGR" = Manag "MGRM" = Mar			
MGRM		SQOB Partners, LLC	
		226 S. Palafox 6th Floor	
		Pensacola, Florida 32502	
MGRM		Scott Mitchell	21
	· ·	935 Fairway Drive	
		Pensacola, Florida 32507	APR
1			 ,
MGRM		Rosie O'Grady's, Inc.	8
		130 East Goverment St.	— — 圣
		Pensacola, Florida 32502	
1			:
MGRM		John Hall	=
		7305 Du Monde Place	
1		Pensacola, Florida 32505	
	date, if other than th	ne date of filing: (OP) be specific and cannot be more than five busine	TIONAL) ess days p
0 days after the d	ate of filing.)		
REQUIRED SI	GNATURE:		
		00 -	
	Signature of a mem	ber or an authorized representative of a member.	
÷	(In accordance with sof this document con	section 608.408(3), Florida Statutes, the execution astitutes an affirmation under the penalties of perjury	
	that the facts stated	d herein are true.)	
	that the facts stated John Hall	d herein are true.) Typed or printed name of signee	

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)