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.

(((H13000041899 3)))



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) 617-6383

From:

Account Name : DUSS, KENNEY, SAFER, HAMPTON & JOOS, P.A.

Account Number : 120090000089 Phone : (904)543-4300

Fax Number : (904)543-4301

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

FLORIDA LIMITED LIABILITY CO.

2303 Market Reprise, L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

FED 2 5 2012

يد د پارلز

ARTICLES OF ORGANIZATION FOR 2303 Market Reprise, L.L.C.

ARTICLE 1: NAME

The name of the Limited Liability Company is: 2303 Market Reprise, L.L.C.

ARTICLE 2: ADDRESS

The mailing and street address of the principal office of the Limited Liability Company is: 2650-2 Roselle Street, Jacksonville, Florida 32204.

ARTICLE 3: DURATION

The period of duration for the Limited Liability Company shall be perpetual.

ARTICLE 4: MANAGEMENT

The Limited Liability Company is to be manager-managed and the name and address of the Manager is: William M. Easton, 2650-2 Roselle Street, Jacksonville, Florida 32204.

ARTICLE 5: REGISTERED AGENT

The name and address of the registered agent for service of process required to be maintained by Section 608,412, Florida Statutes, is: Theresa Marie Kenney, Esq., whose address for service of process is c/o Duss, Kenney, Safer, Hampton & Joos, P.A., 4348 Southpoint Boulevard, Suite 101, Jacksonville, Florida 32216.

IN WITNESS WHEREOF the undersigned, as authorized person, executed these Articles of Organization this: 22- day of February 2013

Theresa Marie Kenney, Authorized Pe

ACCEPTANCE BY REGISTERED AGENT

Having been named as registered agent 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 age

Theresa Marie Keกัต์ey

This Instrument Prepared by:

Theresa Marie Kenney, Eaq., B.C.S., Attorney-At Law 4348 Southpoint Boulevard, Suite 101, Jacksonville, Florida 32216

Phone: (904) 543,4300 FL Bar No. 0970468