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FLORIDA LIMITED LIABILITY CO.  
3318 SOUTH AMMONS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION  
OF  
3318 SOUTH AMMONS, LLC

The undersigned subscriber to these Articles of Organization, a natural person, competent to contract, hereby executed these Articles of Organization for the purpose of forming a limited liability company under the laws of the State of Florida.

ARTICLE I.

The name of this limited liability company is 3318 SOUTH AMMONS, LLC.

ARTICLE II.

The period of duration for this limited liability company shall be perpetual.

ARTICLE III.

The mailing address of this limited liability company is Post Office Box 1234, Monticello, Florida 32345, and street address of the principal office of this limited liability company is 196 South Maine Avenue, Monticello, Florida 32344.

ARTICLE IV.

The name and street address of the initial registered agent of this limited liability company is JOHN S. TODD, 196 South Maine Avenue, Monticello, Florida 32344.

ARTICLE V.

The only members of this limited liability company are JOHN S. TODD and DEVONA TODD, as husband and wife. The members of this limited liability company may admit additional members to this limited liability company by unanimous vote of the members of this limited liability company.

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ARTICLE VI.

The remaining members of this limited liability company shall have the right to continue the business of this limited liability company 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 this limited liability company.

ARTICLE VII.

This limited liability company shall be a manager managed limited liability company and the Manager is JOHN S. TODD, who shall have the right and authority to manage this limited liability company.

ARTICLE VIII.

The organizing member of this limited liability company is JOHN S. TODD.

IN WITNESS WHEREOF, the said organizing member has hereunto set his hand and seal this 27 day of may, 2015.

3318 SOUTH AMMONS, LLC

By:   
JOHN S. TODD  
Organizing Member and Manager

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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STATE OF Florida  
COUNTY OF Madsen

I HEREBY CERTIFY that on this day before me, an officer duly authorized in the State and County named above to take acknowledgments, personally appeared JOHN S. TODD, as the organizing member of 3318 SOUTH AMMONS, LLC, before me known to be the person described as the organizer in, and who executed the foregoing Articles of Organization, and acknowledged before me that he subscribed to these Articles of Organization.

WITNESS my hand official seal in the County and State named above this 27 day of May, 2015.

Joyce A Brown  
Notary Public

My Commission Expires:



JOYCE A. BROWN  
Notary Public, State of Florida  
My Comm. Expires Feb. 8, 2016  
Commission No. FF 81814

SECRETARY OF STATE  
JENNIFER W. PHILLIPS  
TALLAHASSEE, FLORIDA

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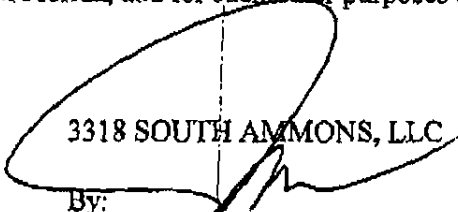
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CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE  
FOR THE SERVICE OR PROCESS WITHIN FLORIDA,  
NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In compliance with Section 605, Florida Statutes, the following is submitted:

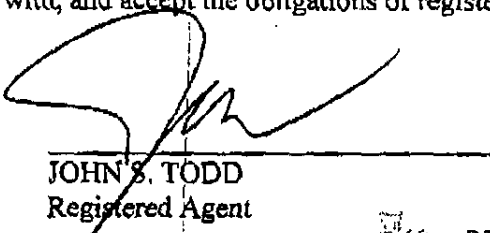
3318 SOUTH AMMONS, LLC, to organize or qualify under the laws of Florida, with its principal place of business at 196 South Maine Avenue, Monticello, Florida 32344, names JOHN S. TODD, whose mailing address is Post Office Box 1231, Monticello, Florida 32345, and whose street address is 196 South Maine Avenue, Monticello, Florida 32344, as its registered agent to accept service of process within Florida, and for such other purposes as required for registered agents.

  
3318 SOUTH AMMONS, LLC

By: \_\_\_\_\_  
JOHN S. TODD, Organizing Member  
and Manager

Dated: May 27, 2015

Having been named to accept service of process for the above named limited liability company, at the place designated in this Certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties. I am familiar with, and accept the obligations of registered agent.

  
JOHN S. TODD  
Registered Agent

Dated: May 27, 2015

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