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COVER LETTER

TO:	New Filing Sec Division of Co							
CHRIL	1207 SUN							
30131			imited Liabi	lity Company	· · · · · · · · · · · · · · · · · · ·			
The en-	closed Articles of	Organization and fee(s)	ire submitte	d for filing.				
Please	return all correspo	ondence concerning this n	natter to the	following:				
	R. Bruce Wa	ırren						
			Name o	f Person				
	Whitehurst,	Blackburn & Warren						
	Firm/Company							
	809 South Broad Street							
	Address							
	Thomasville	, GA 31792						
	sfreeman@wl		City/State a	nd Zip Code				
		E-mail address: (to be use	d for future	annual report notificat	ion)			
For furth	er information co	ncerning this matter, plea	se call;					
Samantha Freeman 22		229	226-2161 _) Daytime Telephon					
			Area Code	Daytime Telephon	ie Number			
Enclose	ed is a check for t	he following amount:						
□\$125	5.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certit	55.00 Filing Fee & fied Copy nal copy is enclosed)	☐S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
Mailing Address New Filing Section Division of Corporations				Street Address				
				New Filing Section Division The Centre of Tallahassee				
P.O. Box 6327				2415 N. Monroe Street, Suite 810				
Tallahassee, FL 32314				Tallahassee, FL 32303				

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

1207 Sunset, LLC				
(Must conta	in the words "Limited I	Liability Company,	"L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street ad	ldress of the principal o	ffice of the Limited	Liability Company is:	
<u>Principa</u>	al Office Address:		Mailing Address:	
277 Old Boston Road Thomasville, GA 31792			Old Boston Road nasville, GA 31792	
ARTICLE III - Registered Age	nt, Registered Office,	& Registered Ager	it's Signature:	_ _
ARTICLE III - Registered Age The Limited Liability Company another business entity with an a The name and the Florida street a	nt, Registered Office, cannot serve as its own ctive Florida registratio	& Registered Ager Registered Agent. '		22 OCT -
The Limited Liability Company another business entity with an a	nt, Registered Office, cannot serve as its own ctive Florida registratio	& Registered Agent. ' Registered Agent. ' n.) l agent are:	it's Signature:	1 1 25.007-4 8
The Limited Liability Company another business entity with an a	nt, Registered Office, ocannot serve as its own ctive Florida registratio	& Registered Ager Registered Agent. '	it's Signature:	P;1
The Limited Liability Company another business entity with an a	nt, Registered Office, ocannot serve as its own ctive Florida registratio	& Registered Agent. ' Registered Agent. ' n.) i agent are: Name	it's Signature:	
The Limited Liability Company another business entity with an a	nt, Registered Office, ocannot serve as its own ctive Florida registrationddress of the registered Andrew L. Tuggle	& Registered Agert. Segistered Agent. Segistered Agent. Segistered Agent. Segistered Agent. Segistered Agent. Segistered Agent are: Name Name	nt's Signature: You must designate an individual or	P;1
The Limited Liability Company another business entity with an a	nt, Registered Office, cannot serve as its own ctive Florida registrationddress of the registered Andrew L. Tuggle	& Registered Agert. Segistered Agent. Segistered Agent. Segistered Agent. Segistered Agent. Segistered Agent. Segistered Agent are: Name Name	nt's Signature: You must designate an individual or	P;1

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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Membe	Name and Address:
"MGR" = Manager	
MGR	RCA, LLC
	277 Old Boston Road Thomasville, GA 31792
	<u></u>
	$\omega = \frac{2}{2}$
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than	the date of filing: (OPTIONAL)
	ist be specific and cannot be more than five business days prior to or 90 days after
he date of filing.) Note: If the date inserted in this block d	oes not meet the applicable statutory filing requirements, this date will not be listed a
the document's effective date on the Der	
ARTICLE VI: Other provisions, if any.	
Other provisions, it any.	
<u> </u>	
REQUIRED SIGNATURE:	Δ
	A
Signatur	e of a member or an authorized representative of a member.
This document	is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
I am aware that	any false information submitted in a document to the Department of State rd degree felony as provide for in \$.817.155, F.S.
constitues a tin	A / Sla 1
	Typed or printed name of signee
	Cyped of printed name of signed

as

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)