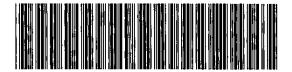
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2016 JUL 12 AH 8: 56
SECRETARY OF STATE
TALLAHASSEE, FLORID

LARRY T. GRIGGS

ATTORNEY AT LAW, P.A.

1301 PLANTATION ISLAND DRIVE SOUTH, SUITE 202B ST. AUGUSTINE, FLORIDA 32080-3112

> TELEPHONE (904) 471-5204 FAX (904) 460-7248 larry@larrygriggs.com

September 16, 2016

Florida Department of State **Division of Corporations** P.O. Box 6327 Tallahassee, Florida 32314

RE: Ref Number: W16000055398

Dear Sir or Madam:

Enclosed please find your letter of August 10, 2016 acknowledging receipt of the \$125.00 fee but stating that the Articles of Organization were being returned for correction.

The correction required has been completed and enclosed are the corrected Articles of Organization for A & C Condo, LLC. I have been retained as the registered agent for the LLC.

Please advise if additional information is required.

Sincerely

LTG/nlb

Enclosures: stated above

cc: M. Bogo



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 10, 2016

MARCIA A. BOGO 100 TITLEIST WAY HENDERSONVILLE, NC 28739

SUBJECT: A & C CONDO, LLC Ref. Number: W16000055398

2016 JUL 12 AM 8: 56 SECRETARY OF STATES

We have received your document for A & C CONDO, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

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) 245-6052.

Nadira D McClees-Sams Regulatory Specialist II

Letter Number: 116A00016877

COVER LETTER

	gistration Section vision of Corporations
SUBJECT:	A & C CONDO, LLC
penanci,	Name of Limited Liability Company
The enclose	d Articles of Organization and fee(s) are submitted for filling.
Please retur	n all correspondence concerning this matter to the following:
	MARCIA A. BOGO
	Name of Person
	Firm/Company
	100 TITLEIST WAY
	Address
	HENDERSONVILLE, NC 28739
Ī	City/State and Zip Code HENDARLENE@AOL.COM
_	E-mail address: (to be used for future annual report notification)
For further in	formation concerning this matter, please call:
	MARCIA A. BOGO 828 891-7373
•	Name of Person Area Code Daytime Telephone Number
Enclosed is	a check for the following amount:
\$125.00 Fi	
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of Corporations

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION

FOR FLORIDA LIMITED LIABILITY COMPANY REQUIRED INFORMATION

ARTICLE I - NAME:

The name of the Limited Liability Company is:

A & C CONDO, LLC



The mailing address and street address of the principal office of the LLC is:

Principal Office Address:

Mailing Address:

400 La Travesia Flora, Unit 104

100 Titleist Way

St. Augustine, FL 32095

Hendersonville, NC 28739

ARTICLE III – REGISTERED AGENT:

The LLC cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.

Registered Agent / Entity

Larry T. Griggs, Attorney At Law

Street Address (No P.O. Boxes)

1301 Plantation Island Drive, Suite 202B

City / State / Zip

St. Augustine, FL 32080-3112

Having been named as registered agent and to accept service of process for the above stated LLC 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)

Larry T. Griggs

	CLE IV – and address of each person authorized t	o manage and control the LLC:	
Title:	"AMBR= Authorized Member "MGR" = Manager	Name and Address:	2016 JUL 12 PALLAHASS
AMBI	R	Barbara C. Ragan 11163 Quitman-Meridian Meridian, MS 39301	12 AH 8: 56
AMBI	R	Marcia A. Bogo 100 Titleist Way Hendersonville, NC 287	
If an edays to	CLE V: Effective date, if other than the effective date is listed, the date must be so or 90 days after the date of filing. If the date inserted in this block does not ate will not be listed as the document's of	specified and cannot be more the ot meet the applicable statutory	filing requirements,
ARTI	CLE VI: Other provisions, if any.		
REQ	<u>UIRED</u> SIGNATURE:		
	Signature of a member (In accordance with section 605.0203 document constitutes an affirmation stated herein are true. I am aware document to the Department of State for in s.817.55, F.S.)	er or an authorized representa (1)(b), Florida Statutes, the execution ander the penalties of perjury that any false information su	cution of this that the facts bmitted in a

Marcia A. Bogo