# 23000249243

#### Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

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.

(((H23000186066 3)))



H230001860863AEC%

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)617-6381

From:

Account Name : AMELIA LAW GROUP, PLLC

Account Number : 120140000037 Phone : (904)310-9501

Fax Number : (904)310-9501

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

Email Address:

LChism@amelialawgroup.com

HAY 19 PH 2: 22

## FLORIDA LIMITED LIABILITY CO. SELL FAMILY FIVE, LLC

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

Electronic Filing Menu

Corporate Filing Menu

Help

(((H23000186066 3)))

#### ARTICLES OF ORGANIZATION OF SELL FAMILY FIVE, LLC

These Articles of Organization are submitted for the purpose of forming a limited liability company pursuant to the Revised Florida Limited Liability Company Act, Chapter 605, Florida Statutes, as the same may from time to time be amended (the "Act").

# SECRETARY OFFICE STORETARY OFFICE STORETARY OFFICE STORETARY OFFICE STORETARY OF THE STORET

#### ARTICLE I - NAME

The name of this limited liability company (the "Company") is SELL FAMILY FIVE, LLC.

#### ARTICLE II - ADDRESS

The address of the principal office is 3121 Venture Place, Suite 1, Jacksonville, Florida 32257, and the mailing address of this Company is P.O. Box 15349, Fernandina Beach, Florida 32035.

#### ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this Company is 3121 Venture Place, Suite 1, Jacksonville, Florida 32257 and the name of its initial registered agent at such address is Charles Wilson.

#### ARTICLE IV - MANAGEMENT OF THE COMPANY

The Company is to be managed by one or more managers and is, therefore, a manager-managed company. The names and addresses of the initial persons or entities authorized to manage and control the Company are as follows:

S&J REAL ESTATE MANAGERS, LLC P.O. Box 15349 Fernandina Beach, Florida 32035

#### ARTICLE V - LIMITED LIABILITY

Except as otherwise expressly provided by the Act, no member, manager, officer, agent or employee of the Company shall be personally liable for the debts, obligations or liabilities of the Company, whether arising in contract, tort or otherwise, or for the acts or omissions of any other member, manager, officer, agent or employee of the Company.

(((H23000186066 3)))

IN WITNESS WHEREOF, the undersigned, being an authorized representative of a Member of the Company, has executed these Articles of Organization this 19 May of May of 2023. In accordance with Section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Steven W. Sell

Authorized Representative

- 2 -

(((H23000186066 3)))

(((H23000186066 3)))

### CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Chapter 605, Florida Statutes, the below named limited liability company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the limited liability company is:

SELL FAMILY FIVE, LLC

2. The name and address of the registered agent and office are:

Charles Wilson 3121 Venture Place, Suite 1 Jacksonville, Florida 32257

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.

Dated: 19 , 2023

Signature of Registered Agent

- 3 -