

00000000/3271

Dennis Spicer
8620 Natures Hollow Way
Jacksonville, Florida 32217
(904) 739-3900

00799-00524-00671
Purpose PL

Tuesday, September 12, 2000

First Financial PL

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, Florida 32399

W-22864

Re: Registration

700003392437--7
-09/13/00--01103--006
****125.00 ****125.00

Greetings:

Enclosed is an "Article of Organization for Florida Limited Liability Co." along with a payment for \$125.00.

Please process this and let me know if you have any questions.

Sincerely,


Dennis Spicer

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 OCT 27 PM 5:07



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

September 19, 2000

DENNIS SPICER
8620 NATURES HOLLOW WAY
JACKSONVILLE, FL 32217

SUBJECT: FIRST FINANCIAL, PL
Ref. Number: W00000022864

We have received your document for FIRST FINANCIAL, PL and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the purpose of the professional company somewhere in 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) 487-6967.

Michelle Hodges
Document Specialist

Letter Number: 900A00049408



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

October 18, 2000

DENNIS SPICER
8620 NATURES HOLLOW WAY
JACKSONVILLE, FL 32217

SUBJECT: FIRST FINANCIAL, PL
Ref. Number: W00000022864

We have received your document for FIRST FINANCIAL, PL and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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Michelle Hodges
Document Specialist

Letter Number: 900A00049408

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

FIRST FINANCIAL, PL

Purpose: FINANCIAL SERVICES COMPANY

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

2744 U.S. 1 SOUTH
ST. AUGUSTINE, FL 32086

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

CHARLES STEVENS
Name
2744 U.S. 1 SOUTH
Florida street address (P.O. Box **NOT** acceptable)
ST. AUGUSTINE FL 32086
City, State, and Zip

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 608, F.S..

[Signature]
Registered Agent's Signature

Article IV - Management (Check box if applicable.)

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

[Signature]
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

DENNIS SPICER
Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 OCT 27 PM 5:07