

L020000002326

TRANSMITTAL LETTER

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

200004793842--6
-01/24/02--01025--001
****480.00 ****160.00

SUBJECT: ST. JOHNS COMMERCIAL RENTALS, LLC
(ST. JOHNS HOMESTEAD PROPERTY, LLC)
LITTLE FALLS HOLDINGS, LLC

Enclosed IS an original and one (1) copy of the articles of incorporation and a check for \$480.00. \$160 for each LLC

FROM: Charles T. Stevens
2744 US 1 SOUTH
ST. AUGUSTINE, FL 32086
(904) 797-9520

W21/31
FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 JAN 24 AM 10:13

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: ST. JOHNS HOMESTEAD PROPERTY, LLC

ARTICLE II - Address:

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

3500 RED CLOUD TRAIL, ST. AUGUSTINE, FLORIDA 32086

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

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

JOHN STEVENS

Name

3500 RED CLOUD TRAIL

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] *Authorized Rep*
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.)

JOHN STEVENS

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)

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