L030909090901

OAN BACHTEL (Requestor's Name)
7434 Hegitland Cis
(Address) Tallahassic; FL 30312
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
Heartpine Properties LLC (Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
al net

Office Use Only



700013716437

03/19/03--01008--023 **155.00



O3 MAR 19 AM ID: 50

ARTICLES OF ORGANIZATION

OF.

HEART PINE PROPERTIES, L.L.C

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes (the "Florida Limited Liability Company Act"), for the purpose of forming a Limited Liability Company under the laws of the State of Florida do set forth the following:

1. NAME.

The name of the Limited Liability Company is HEART PINE PROPERTIES, L. L. C. (hereinafter referred to as the "Company").

1. PERIOD OF DURATION.

The period of duration of the Company shall be from the date of filing of its Articles of Organization until the first to occur of the following:

- (i) The date that is seventy-five (75) years from the date of filing of the Articles of Organization with the Department of State, State of Florida; or
- (ii) Dissolution of the Company pursuant to the provisions of the Florida Limited Liability Act; or
- (iii) By the mutual written agreement of a majority in capital interest of the Members.

PURPOSE.

The purpose for which the Company is organized is to engage in any and all businesses and activities permitted by the laws of the State of Florida. The Company shall have all the powers vested in a limited liability company organized and existing by virtue of such laws.

3. ADDRESS OF PLACE OF BUSINESS.

The mailing address of the Company is 1400 Village Square Boulevard #3-234, Tallahassee, FL 32312. Such address may be changed from time to time as provided in the written Operating Agreement executed by all of the Members.

SECRETARY OF STATE

4. REGISTED AGENT.

The initial registered agent in Florida for the Company is Erin B. Sjostrom, and the initial registered office is located at 6359 Duck Call Court, Tallahassee, FL 32309.

5. MEMBERS.

The Company shall have at least two (2) Members, and may admit additional members upon the prior unanimous written agreement of the then existing Members, or as otherwise provided in the written Operating Agreement executed by all the of the Members.

6. CONTINUITY OF BUSINESS.

Upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a Member or the occurrence of any other event, which terminates the continued membership of a Member in the Company, the business of the Company shall be continued and the Company shall not be dissolved without the prior written consent of all the remaining Members of the Company.

7. MANAGEMENT.

Management of the Company shall be reserved to the Members. The Members may, however, elect_a manager in the manner provided in any written operating agreement among all of the Members. Any such Manager shall have the powers and authority expressly granted under the Operating Agreement.

8. INDEMNIFICATION.

Except as expressly provided otherwise in the Operating Agreement, the Company shall indemnify any Member or former Member to the full extent permitted under the Florida Limited Liability Company Act.

Executed at Tallahassee, Florida, in the 19_ day of March 2003.

> Member Bachtel,

Member øst/rom.

STATE OF FLORIDA COUNTY OF LEON

The foregoing instrument was acknowledged before me this M day of March 2003 by Daniel K. Bachtel, member of Heart Pine Properties, L.L.C., a Limited Liability Company, on behalf of the Company. He (V) is personally known to be or () produced N/A as identification.

NOTARY PUBLIC - STATE OF FLORIDA

PRINT, TYPE OR STAMP NAME OF



DIVISION OF CHEPORATIONS

03 MAR 19 AMID. FO

STATE OF FLORIDA COUNTY OF LEON

The foregoing instrument was acknowledged before me this 14 day of March 2003 by Erin B. Sjostrom, member of Heart Pine Properties, L.L.C., a Limited Liability Company, on behalf of the Company. SHe (1) is personally known to be or () produced 1/1 as identification.

NOTARY PUBLIC - STATE OF FLORIDA

PRINT, TYPE OR STAMP NAME OF

NOTARY PUB

CHRISTINE P. CONRAD MY COMMISSION # DD 048251 EXPIRES: September 27, 2005 Bonded Thru Pichard Insurance Agency