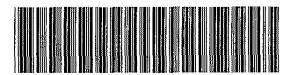
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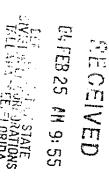
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#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 25, 2004

CAPITAL CONNECTION

TALLAHASSEE, FL

SUBJECT: GROVE LIMITED, LLC Ref. Number: W04000007875



We have received your document for GROVE LIMITED, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$155.00 payment.

A Florida Limited Liability company cannot use the suffix LIMITED its name. You can just use LLC. Or you could use LIMITED LIABILITY COMPANY, or LIMITED COMPANY without the LLC.

Please call if you have questions.,

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) 245-6914.

Buck Kohr Document Specialist

Letter Number: 104A00012634

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BECEINED

RE-SUBMIT
PLEASE OBTAIN THE ORIGINAL
FILE DATE

### CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
•	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
·	Officer Search
·	Fictitious Search
Signature	Fictitious Owner Search
Signature	Vehicle Search
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#### ARTICLES OF ORGANIZATION

OF

Grove, LLC



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 Grove, LLC.
. (hereinafter referred to as the Company).

#### 2. PERIOD OF DURATION.

. . .

The period of duration of the Company shall not exceed the maximum term permitted under the Florida Limited Liability Company Act. The Company may be dissolved sooner, however, as provided in the Florida Limited Liability Act or the written Operating Agreement to be executed by all of the Members of the Company.

#### 3. PURPOSE

The purpose for which the Company is organized is for the purchase and construction of homes at the Preserve of Grayton Beach any and all other businesses and activities permitted by the laws of the State of Florida. The Company shall have all of the powers vested in a limited liability company organized and existing by virtue of such laws.

#### 4. ADDRESS OF PLACE OF BUSINESS.

The street address of the place of business in Florida for the Company is: 4604 Southwinds Drive, Sandestin, Florida 32550. Such address may be changed from time to time as provided in the Operating Agreement.

#### 5. REGISTERED AGENT.

The initial registered agent in Florida for the Company is: Gary A. Shipman, and the initial registered office is located at 2057 Delta Way, Tallahassee, Florida 32303.

#### 6. INITIAL CAPITAL CONTRIBUTIONS.

The total amount of cash and a description of the agreed value of property other than cash contributed to the Company is as follows: Ten and No/100 Dollars (\$10.00) in cash.

#### 7. ADDITIONAL CONTRIBUTIONS.

The total additional contributions, if any, agreed to be made by all Members and the times at which such contributions shall be made, are as follows: No total additional contributions have been agreed to as of the date of filing of these Articles of Organization. Additional contributions, if any, will be made as provided in the Operating Agreement.

#### 8. MEMBERS; ADMISSION OF NEW MEMBERS.

The Company shall have at least one (1) member (the AMembers@). New Members may be admitted in the manner provided in the Operating Agreement.

#### 9. 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.

#### 10. MANAGEMENT.

The management of the Company shall be reserved to the Members. In the event of the death of a Manager, the remaining Manager(s) shall serve until the next meeting of the Members and until a successor (if any is elected) for the deceased Manager is qualified. The names and addresses of the Members who are to serve as the managing Members (the AManagers@) until the first annual meeting of Members or until their successors are duly elected and qualified are as follows:

Sam Owen
 Lynwood Lane
 Nashville, Tennessee 37205

#### 11. INDEMNIFICATION.

Unless expressly agreed otherwise in writing by all of the Members, the Company shall indemnify any Manager or former Manager to the full extent permitted under the Florida Limited Liability Company Act.

Executed on the 28th day of January, 2004.

By: Member

STATE OF Florida,

COUNTY OF LIBITION.

The foregoing instrument was acknowledged before me this 28th day of January 2004, by Sam Durd, a member of Grove Limited, L.L.C., a Florida limited liability company, on behalf of the company. He is personally known to me or has produced as identification.

NOTARY PUBLIC - STATE OF FLORIDA

Print, Type or Stamp Name of Notary

Public

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## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Chapter 608, Florida Statutes, the undersigned 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 company is: Grove, LLC.
- 2. The name and address of the registered agent and office is:

Gary A. Shipman 2057 Delta Way Tallahassee, Florida 32303

SIGNATURE

TITLE

DATE

Incorporator

February 9, 2004

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.

SIGNATURE

DATE

February 9, 2004

\$35.00

REGISTERED AGENT FILING FEE:

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