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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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DIVISION OF CORPORATION

04 MAY -3 PM 2:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 MAY -3 AM 7:53

FILED

Williams, Gautier, Gwynn & DeLoach, P.A.

Requestor's Name

Post Office Box 4128

Address

Tallahassee, FL 32315 850-386-3300

City/State/Zip

Phone #

Office Use Only

FILED
04 MAY -3 AM 7:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Peach Center Properties, LLC
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☒ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

**ARTICLES OF ORGANIZATION OF
PEACH CENTER PROPERTIES, LLC**

The undersigned, being authorized to execute and file these Articles, hereby certify that:

ARTICLE I — Name:

The name of the Limited Liability Company is: PEACH CENTER PROPERTIES, LLC.

ARTICLE II — Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 4223 Capital Circle N.W., Tallahassee, Florida 32303

ARTICLE III — Duration:

The period of duration for the Limited Liability Company shall be until December 31, 2050

ARTICLE IV — Management:

The Limited Liability Company is to be managed by a manager and the name and address of such manager who is to serve as manager is:

Catherine D. Mayfield
4223 Capital Circle N.W.
Tallahassee, Florida 32303

ARTICLE V — Admission of Additional Members:

The right of the members to admit additional members and the terms and conditions of the admissions shall be to require the unanimous consent of all of the members

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this 3 day of May, 2004.


CATHERINE D. MAYFIELD

FILED
04 MAY -3 AM 7:53
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

**PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA
STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE
FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND
REGISTERED AGENT IN THE STATE OF FLORIDA.**

1. The name of the Limited Liability Company is: PEACH CENTER PROPERTIES, LLC.
2. The name and the Florida street address of the registered agent and registered office are:

Catherine D. Mayfield
4223 Capital Circle N.W.
Tallahassee, Florida 32303

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.


CATHERINE D. MAYFIELD