

L04000047121

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

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missing pages

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Magnolia Plaza at Thomas Drive, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Terry W. Dooley
(Name of Person)

Magnolia Plaza at Thomas Drive, LLC
(Firm/Company)

924 Gainesville Highway Suite 120
(Address)

Buford, Georgia 30518
(City/State and Zip Code)

For further information concerning this matter, please call:

Terry W. Dooley at (678) 318-1055
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

SECRETARY OF STATE
TALLAHASSEE, FL

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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

June 10, 2004

TERRY W. DOOLEY
MAGNOLIA PLAZA AT THOMAS DRIVE, LLC
924 GAINESVILLE HIGHWAY, SUITE 120
BUFORD, GA 30518

SUBJECT: MAGNOLIA PLAZA AT THOMAS DRIVE, LLC
Ref. Number: W04000022338

We have received your document for MAGNOLIA PLAZA AT THOMAS DRIVE, LLC 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 are missing the first page of the Articles of Organization.

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) 245-6913.

Diane Cushing
Document Specialist

Letter Number: 404A00039321

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

Magnolia Plaza at Thomas Drive, LLC

ARTICLE II - Address:

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

Principal Office Address:

924 Gainesville Highway Suite 120

Buford, Georgia 30518

Mailing Address:

924 Gainesville Highway Suite 120

Buford, Georgia 30518

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

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

Michael T. Hickey

Name

2750 Stickney Pointe Road Suite 106

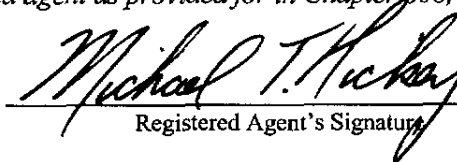
Florida street address (P.O. Box **NOT** acceptable)

Sarasota

FLORIDA 34231

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, Florida Statutes..



Registered Agent's Signature

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TALLAHASSEE FLORIDA

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MORM" = Managing Member

Name and Address:

MGRM

Terry W. Dooley

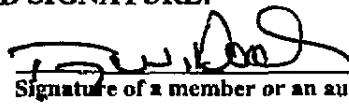
924 Gainesville Highway Suite 120

Buford, Georgia 30518

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED 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.)

Terry W. Dooley, Managing Member

Typed or printed name of signer

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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TALLAHASSEE, FL