

L040000048927

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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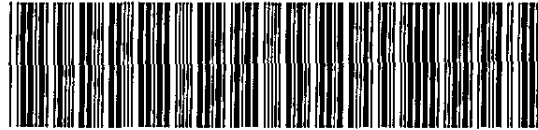
(Business Entity Name)

(Document Number)

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04 JUN 30 AM 10:48
DIVISION OF CORPORATION

FILED
04 JUN 30 PM 1:08
TALLAHASSEE STATE
TALLAHASSEE, FLORIDA

Handwritten signature/initials



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 784920 4814233

AUTHORIZATION :

COST LIMIT : \$ 125.00

FILED
04 JUN 30 PM 1:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : June 30, 2004

ORDER TIME : 9:35 AM

ORDER NO. : 784920-005

CUSTOMER NO: 4814233

CUSTOMER: Ms. Stephanie Pearle
Morris Manning & Martin

1600 Atlanta Financial Center
3343 Peachtree St, Northeast
Atlanta, GA 30326

DOMESTIC FILING

NAME: JLC ANASTASIA, LLC

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Amanda Haddan - EXT. 2955

EXAMINER'S INITIALS: _____

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

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

JLC Anastasia, LLC

ARTICLE II - Address:

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

Principal Office Address:

1575 Northside Drive NW

100 Atlanta Technology Center, Suite 200

Atlanta, Georgia 30318

Mailing Address:

1575 Northside Drive NW

100 Atlanta Technology Center, Suite 200

Atlanta, Georgia 30318

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

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

Corporation Service Company

Name

1201 Hays Street,

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

Tallahassee

FLORIDA 32301

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..

Carla Lohi

Registered Agent's Signature

Carla Lohi
Asst. Vice President

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

LeCraw Anastasia Development, LLC

1575 Northside Drive, Suite 200

Atlanta, Georgia 30318

(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.)

Sean J. Reynolds
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)