

L-04000082552

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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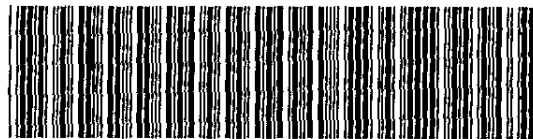
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Island Time Properties, 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:

Richard L. Coleman
(Name of Person)

Coleman, Talley, Newbern, Kurrie, Preston & Holland, LLP
(Firm/Company)

910 North Patterson Street
(Address)

Valdosta, Georgia 31601
(City/State and Zip Code)

For further information concerning this matter, please call:

Richard L. Coleman at (229) 242-7562
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|---|---|---|---|

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION FOR
ISLAND TIME PROPERTIES, LLC,
A FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is: "Island Time Properties, LLC".

ARTICLE II - Address:

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

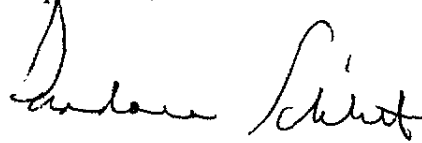
3318 Bay Rocky Ford Rd.
Moultrie, Georgia 31768

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

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

Pandora Schlitt
1672 E. Gulf Beach Drive
St. George Island, Florida 32328

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designed 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 regarding 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, F.S..



Pandora Schlitt

2004-01-09 PM 3:37
CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV – Manager:

The name and address of each Manager is as follows:

Title:

Name and Address:

MGR

James H. Campagna
3318 Bay Rocky Ford Rd.
Moultrie, Georgia 31768

Required Signature:



Richard L. Coleman, Authorized Representative

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA