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TRANSMITTAL LETTER

| TO: Registration Section Division of Corporations | | |
|---|---|--|
| SUBJECT: Moss Lane Holdings, LLC (Name of Limited | Liability Company) | |
| The enclosed Articles of Organization and fee(s) are sul | bmitted for filing. | |
| Please return all correspondence concerning this matter | to the following: | |
| Andrew R. Swanson | | |
| (N | ame of Person) | |
| Moss Lane Holdings, LLC | | T., 0 |
| | irm/Company) | EC. No. |
| 124 E. Welborne Avenue #6 | | NOV 29 PH 2: L9 CHETATY UP STATE LAHASSEE, FLORID |
| | (Address) | H 2 |
| Winter Park, FL 32789 | | TATE ORIDA |
| (City/S | State and Zip Code) | • |
| For further information concerning this matter, please c | all: | |
| Andrew R. Swanson (Name of Person) | at (321) 282-8090 (Area Code & Daytime Tel | enhone Number |
| (Clarite of Fotobly) | (rica code de Dayaine Ter | epitone (validos) |
| Enclosed is a check for the following amount: | | |
| □ \$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status | ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) | \$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 AD Registration Se Division of Cor P.O. Box 6327 Tallahassee, Flo | ection rporations |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Compa | iny is: |
|--|---|
| Moss Lane Holdings, LLC | |
| ARTICLE II - Address: The mailing address and street address of | the principal office of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| Moss Lane Holdings, LLC | Moss Lane Holdings, LLC |
| 124 E. Welborne Avenue #6 | 124 E. Welborne Avenue #6 |
| Winter Park, FL 32789 | Winter Park, FL 32789 |
| The name and the Florida street address o Andrew R. Swanson 907 Moss Lane | Name Name Name Preet address (P.O. Box NOT acceptable) |
| | |
| Winter Park, FL 32789 | FL 32789 95 : |
| City, | State, and Zip |
| liability company at the place designat registered agent and agree to act in this constatutes relating to the proper and compaccept the obligations of my position of the proper agency the obligations of my position of the proper agency. | and to accept service of process for the above stated limited ted in this certificate, I hereby accept the appointment as apacity. I further agree to comply with the provisions of all lete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 608, F.S |

(CONTINUED)

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

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

| Title: | Name and Address: |
|--|--|
| "MGR" = Manager "MGRM" = Managing Member | |
| marm | Andrew R. Swanson |
| | 124 E. Welborne Avenue #6 Winter Park, FL 32789 |
| marm | James F. Tibbs |
| • • • • • • • • • • • • • • • • • • • | 181 Circle Drive Maitland, FL 32751 |
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| As a second of the second of t | |
| (Use attachment if necessary) | |
| NOTE: An additional article must be | added if an effective date is requested. |
| REQUIRED SIGNATURE: | |
| Signature of a member o | r an authorized representative of a member. |
| (In accordance with section of this document constitut that the facts stated here | n 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury in are true.) |
| Andrew R. Swanson | |

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

NOV 29 PM 2: 49
SECRETARY OF STATE

Typed or printed name of signee