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# TRANSMITTAL LETTER

TO:

Registration Section

Division of Corporations SUBJECT: SMITH FERGUSON DEVELOPMENTS, 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: Esther D. Nichols, CPA (Name of Person) The Nichols Group, PA (Firm/Company) 1329 Kingsley Ave, Ste D (Address) Orange Park, FL 32073 (City/State and Zip Code) For further information concerning this matter, please call: Esther D. Nichols 904 ) 264-1665 (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for the following amount: X\$125.00 Filing Fee \_\_ \$130.00 Filing Fee \$155.00 Filing Fee \$160.00 Filing Fee, & Certificate of Status & Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed) **MAILING ADDRESS:** STREET ADDRESS: Registration Section Registration Section

Division of Corporations

Tallahassee, Florida 32314

P.O. Box 6327

Division of Corporations

Tallahassee, Florida 32399

409 E. Gaines Street

## **ARTICLES OF ORGANIZATION**

OF

# SMITH FERGUSON DEVELOPMENTS, LLC, A FLORIDA LIMITED LIABILITY COMPANY

# **ARTICLE I**

# NAME

The name of the limited Liability Company is: SMITH FERGUSON DEVELOPMENTS, LLC.

# **ARTICLE II**

# PRINCIPAL OFFICE

The principal office address of this Limited Liability Company is:

4905 Belfort Road, Suite 110 Jacksonville, FL 32256

The mailing address of this Limited Liability Company is:

4905 Belfort Road, Suite 110 Jacksonville, FL 32256

# SECRETARY OF SAIL TALLAHASSEE, FLORIDA

# **ARTICLE III**

# REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE

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

Esther D. Nichols, CPA 1329 Kingsley Ave, Ste D Orange Park, FL 32073 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, F.S.

Esther D. Nichols, CPA Registered Agent

# **ARTICLE IV**

# MANAGER(S) OR MANAGING MEMBERS

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

Managing Member

David T. Smith 4905 Belfort Road, Suite 110 Jacksonville, FL 32256

Managing Member

James W. Ferguson 4905 Belfort Road, Suite 110 Jacksonville, FL 32256

### ARTICLE V

# <u>DURATION</u>

The period of duration of this Limited Liability Company is perpetual.

# SECIRE ANSEE, FLORIDA

# ARTICLE VI

# ADDITIONAL MEMBERS

The members have the right to admit additional members upon terms and conditions to be determined at a subsequent date.

# **ARTICLE VII**

# MEMBER RIGHTS

The members have the right to continue the business of the Limited Liability Company upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or an occurrence or any other event terminating the continued membership of a member and the Limited Liability Company.

IN WITNESS WHEREOF, the undersigned Member has executed these Articles of Organization, this \_\_/2\*\* day of \_\_/anuary\_\_\_\_\_, 2004.

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.

David T. Smith Managing Member

BECRELANT OF STA