

W5000011891

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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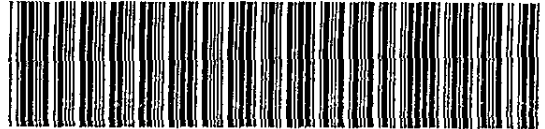
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MJH

TALLAHASSEE
FLORIDA

05 JAN 28 PM 3:20

FILED

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BUILT SMART HOMES 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:

PHILIP GRIFFIN
(Name of Person)

BUILT SMART HOMES LLC
(Firm/Company)

405 S. 8TH ST
(Address)

FERNANDINA BEACH FL 32034
(City/State and Zip Code)

For further information concerning this matter, please call:

PHILIP GRIFFIN at (904) 261-2770
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input checked="" 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BUILT SMART HOMES LLC

ARTICLE II - Address:

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

Principal Office Address:

405 S. 8TH ST
FERNANDINA BEACH
FLORIDA 32034

Mailing Address:

PO BOX
FERNANDINA BEACH
FLORIDA 32034

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

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

PHILIP GRIFFIN
Name

405 S. 8TH ST
Florida street address (P.O. Box **NOT** acceptable)
FERNANDINA BEACH FL 32034
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, F.S.


Registered Agent's Signature

(CONTINUED)

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05 JAN 28 PM 3:20
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

"MGRM" = Managing Member

Name and Address:

MGRM

PHILIP GRIFFIN
2219 OFFSHORE DRIVE
FERNANDINA BEACH FL 32034

MGRM

JANET GRIFFIN
2219 OFFSHORE DRIVE
FERNANDINA BEACH FL 32034

MGRM

CATHERINE GARRETT
2017 B CLINCH DRIVE
FERNANDINA BEACH FL 32034

MGRM

CHARLES GARRETT
2017 B CLINCH DRIVE
FERNANDINA BEACH FL 32034

(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.)

PHILIP GRIFFIN

Typed or printed name of signee

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)