

FEB-08-05 TUE 05:11 PM

FAX NO.

P. 01

Division of Corporations

**L05000013533**

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)205-0383

From:

Account Name : HOLBROOK, AKEL, COLD, STIEFEL & RAY, P.A.  
Account Number : I20020000128  
Phone : (904)356-6311  
Fax Number : (904)356-7330

**LIMITED LIABILITY COMPANY**

1555 E. 8th Street, LLC

|                       |          |
|-----------------------|----------|
| Certificate of Status | 1        |
| Certified Copy        | 0        |
| Page Count            | 02       |
| Estimated Charge      | \$130.00 |

RECEIVED  
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DIVISION OF CORPORATIONS

2005 FEB -9 AM 8:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

1555 E. 8th Street, 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:**

1102 1st Street  
Neptune Beach, FL 32266

1102 1st Street  
Neptune Beach, FL 32266

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

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

Kathleen Holbrook Cold  
Name

One Independent Drive, Suite 2301  
Florida street address (P.O. Box **NOT** acceptable)

Jacksonville FL 32202  
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.*

*Kathleen Cold*  
Registered Agent's Signature

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**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

David A. Baker  
1102 1st Street

Neptune Beach, FL 32266

MGR


Mary A. Baker  
1102 1st Street

Neptune Beach, FL 32266

(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.)

Kathleen Holbrook Cold  
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)

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