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## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: AMERAUS 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:
Jane Geddes
(Name of Person)
Ameraus Properties. LLC
(Firm/Company)
3225 S. MacDill Ave. #129-285
(Name of Person)  Ameraus Properties. LLC  (Firm/Company)  3225 S. MacDill Ave. #129-285  (Address)
DON'S CONTROL OF THE
Tampa, Florida 33629
(City/State and Zip Code)
For further information concerning this matter, please call:
Jane Geddesat ( 813 810-2560
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
☐ \$125.00 Filing Fee
STREET ADDRESS:  Registration Section  Division of Corporations  409 E. Gaines Street  MAILING ADDRESS:  Registration Section  Division of Corporations  P.O. Box 6327

Tallahassee, Florida 32314

Tallahassee, Florida 32399

ARTICLES OF ORGANIZATION FOR FI	LORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name:	<b>一种</b>
The name of the Limited Liability Company is	: B2/
AMERAUS PROPERTIES, LLC.	· 原名 文
ARTICLE II - Address:	
The mailing address and street address of the p	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3255 S. MacDill Ave.	3255 S. MacDill Ave.
#129-285	#129-285
Tampa, FI 33629	Tampa, FL 33629
ARTICLE III - Registered Agent, Registere The name and the Florida street address of the	
Gigi Fernandez	
Name	
3225 S. MacDill Ave. #129-2	85
Florida street ad	ldress (P.O. Box NOT acceptable)
Tampa, Florida 33629	FL
City, State,	and Zip
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 608, F.S

(CONTINUED)

Registered Agent's Signature

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
Mgr.	Gigi Fernandez
	3225 S. MacDill Ave. #129-285
	Tampa, Florida 33629
Mgrm.	Rennae Stubbs
	3225 S. MacDill Ave. #129-285
	Tampa, Florida 33629
Mgrm.	Jane Geddes
	3225 S. MacDill Ave. #129-285
	Tampa, Florida 33629
Mgrm.	3225 S. MacDill Ave. #129-285 Tampa, Florida 33629 Mgrm.
	Tampa, Florida 33629
(Use attachment if necessary)	3225 S. MacDill Ave. #129-285 Tampa, Florida 33629
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE:	
Signature of a)menther o	r an authorized representative of a member.

that the facts stated herein are true.)

Jane Geddes

Typed or printed name of signee

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

## 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)