

LOS 00003075

FILED

2005 MAR 25 P 3: 03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

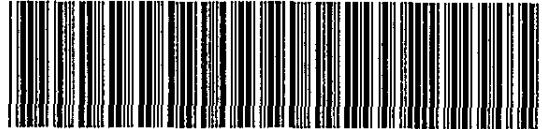
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W05-5232

AL

Office Use Only



800045215408

01/25/05--01016--010 **125.00



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

FILED

2005 MAR 25 P 3:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

February 1, 2005

NATALIE SCHUBERT
226 COLLEGE AVE.
PANAMA CITY, FL 32401

SUBJECT: EMERALD GROUP PROPERTIES LLC
Ref. Number: W05000005232

We have received your document for EMERALD GROUP PROPERTIES LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The articles of organization must be prepared in compliance with section 608.407, Florida Statutes. We are enclosing the appropriate forms and instructions for your convenience.

THIS OFFICE DOES NOT FILE OPERATING AGREEMENTS.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt
Document Specialist

Letter Number: 405A00007035

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EMERALD GROUP PROPERTIES, LLC
(Name of Limited Liability Company)

FILED

2005 MAR 25 P 3:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

NATALIE T. SCHUBERT
(Name of Person)

EMERALD GROUP PROPERTIES, INC.
(Firm/Company)

226 COLLEGE AVE
(Address)

PANAMA CITY, FL 32401
(City/State and Zip Code)

For further information concerning this matter, please call:

NATALIE SCHUBERT
(Name of Person)

at (850) 832-4769
(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

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

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EMERALD GROUP PROPERTIES LLC
(Name of Limited Liability Company)

FILED
2005 MAR 25 P 3:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

NATALIE T. SCHUBERT
(Name of Person)

EMERALD GROUP PROPERTIES LLC
(Firm/Company)

226 COLLEGE AVENUE
(Address)

PANAMA CITY, FL 32401
(City/State and Zip Code)

For further information concerning this matter, please call:

NATALIE SCHUBERT at (850) 832-4769
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee
(AMOUNT PAID)
- ☐ \$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 ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2005 MAR 25 P 3:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

EMERALD GROUP PROPERTIES 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:

226 COLLEGE AVE.
PANAMA CITY, FL 32401

226 COLLEGE AVE.
PANAMA CITY, FL 32401

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

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

NATALIE SCHUBERT
Name

226 COLLEGE AVE
Florida street address (P.O. Box **NOT** acceptable)
PANAMA CITY FL 32401
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.

Natalie Schubert
Registered Agent's Signature

(CONTINUED)

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

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

FILED

2005 MAR 25 P 3:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

TINA RIVES
226 COLLEGE AVE.
PANAMA CITY, FL 32401

MGRM

NATALIE SCHUBERT
226 COLLEGE AVE
PANAMA CITY, FL 32401

MGRM

SUE HARPER
116 MARIN DR.
PANAMA CITY, FL 32405

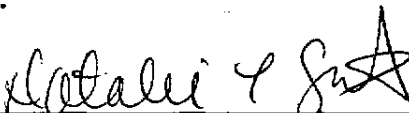
MGRM

SUZY ROBERTS
347 N. MCARTHUR
PANAMA CITY, FL 32401

(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.)

NATALIE T. SCHUBERT

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)