L05000049865

(Requestor's Name)			
(Address)			
(Address)			
(1001000)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
, , , , , , , , , , , , , , , , , , , ,			
(Document Number)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
Special manuculous to a ling Officer.			

Office Use Only



600054297946

05/13/05--01023--012 **155.00

FILED
2005 HAY 13 PH 2: 24
2015 HAY 13 PH 2: 24
2017 AHASSEE, FLORIDA

J. BAY 1 9 2005

TRANSMITTAL LETTER

TO: Registration S Division of Co			
SUBJECT: Daphne	Group, LLC (Name of Limite	d Liability Company)	
The enclosed Articles of	of Organization and fee(s) are s	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
Z. Steve		None of Barrow	
	()	Name of Person)	
Daphne Group,LLC			
	(Firm/Company)	AN DES
3105 N. Da	vis Highway		PILED PH 2: 24 NUMBER OF CORPORATION NUMBER
		(Address)	SEE D
Pens	acola, FL 32503		ORATI FLORI
	(City/	State and Zip Code)	OA'S
For further information	concerning this matter, please	call:	
Steven Smith		at (850) 434-3124	
(Name	of Person)	(Area Code & Daytime To	elephone Number)
Enclosed is a check for	or the following amount:		
☐ \$125.00 Filing Fee	\$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:		MAILING A	DDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 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	Y:
Daphne Group, LLC	
ARTICLE II - Address:	
The mailing address and street address of the p	orincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3105 N. Davis Highway	P.O. Drawer 2458
Pensacola, FL 32503	P.O. Drawer 2458 Pensacola, FL 32513
ARTICLE III - Registered Agent, Registere	- 13 E
The name and the Florida street address of the	registered agent are:
Z. Steven Smith	
Name	• 0
4576 Whisper Circle	
Florida street ad	Idress (P.O. Box NOT acceptable)
Pensacola, FL 32504	FL
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)

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:	
MGRM	Z. Steven Smith	
	4576 Whisper Circle	
	Pensacola, FL 32504	
MGRM	F. Stephen Hartsfield	
	2100 Parklake Dr. NE Suite A	
	Atlanta, GA 30345-2167	
	PLOS PAR	2005 MAY 13 T
		PH 2: 24
(Use attachment if necessary)	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	彩之
NOTE: An additional article must be	added if an effective date is requested.	DES.
REQUIRED SIGNĀTURE:	-	
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.)

Z. Steven Smith

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)