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ACCOUNT NO. : 072100000032 REFERENCE: 440630 CEON OF SERVICE STATES AUTHORIZATION ? COST LIMIT : \$ 125.00 ORDER DATE: June 21, 2005 ORDER TIME : 2:35 PM ORDER NO. : 440630-005 CUSTOMER NO: 4321551 CUSTOMER: Ms. Sally Hentz Moore & Van Allen, Pllc Suite 4700 100 North Tryon Street Charlotte, NC 28202-4003 DOMESTIC FILING PUCKETT LAND DEVELOPMENT, LLC NAME: EFFECTIVE DATE: _ ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMÍNER'S INITIALS:

CONTACT PERSON: Troy Todd - EXT. 2940

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE I - Name:

The name of the Limited Liability Company is:

Puckett Land Development, 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: |
|---------------------------------|---------------------------------|
| 789 Harbour Isles Court | 789 Harbour Isles Court |
| North Palm Beach, Florida 33408 | North Palm Beach, Florida 33408 |
| | |

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

| Corporation Service | e Company |
|-----------------------|-------------------------------------|
| 1 | Name |
| 1201 Hays Street | |
| Florida street addres | ss (P.O. Box <u>NOT</u> acceptable) |
| Tallahassee | FLORIDA 32301 |
| City, S | 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, Florida Statutes..

By: KOLLONAL (). Ske () ()

Registered Agent's Signature

Deborah D. Skipper Asst. V. Pres.

Page 1 of 2 (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> | Name and Address: |
|--------------------------------|---|
| "MGR" = Manager | |
| "MGRM" = Managing Member | |
| MGR | Stephen R. Puckett |
| FIGR | 789 Harbour Isles Court |
| | North Palm Beach, Florida 33408 |
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| (Use attachment if necessary) | |
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| NOTE: An additional article mu | st be added if an effective date is requested. |
| DECYMPER STORT THEFT | |
| REQUIRED SIGNATURE: | |
| Start 11th | estite- |
| Signature of a member or | r an authorized representative of a member. |
| | n 608.408(3), Florida Statutes, the execution as an affirmation under the penalties of perjury are true.) |
| By: Stephen R. Puc | ckett, Sole Member |
| | or printed name of signee |

Filing Fees:
\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)