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(Re	equestor's Name)	
(Ac	idress)	
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Ų ii	idiossy	
(Ci	ty/State/Zip/Phone	> #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		8227
	Office Lice Onl	CALO



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TRANSMITTAL LETTER

CTDE	ET ADDDESS.	MAILING A	nndegg.
Ø \$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)
,	r the following amount:		•
	of Person)	(Area Code & Daytime To	elephone Number)
Done	ald M. Johnson Jr.	at (_904)_786-6400	
For further information	concerning this matter, please	call:	
			REAL PROPERTY OF THE PROPERTY
		State and Zip Code)	
	.larke	onville, Fl. 32205	SCER FLORIDA
		(Address)	
	5773 No	mandy Blvd.	IALL I
	,	· ····································	
		HQ, LLC Firm/Company)	
	(1	Jame of Person)	
	Do	nald M. Johnson Jr.	
Please return all corresp	ondence concerning this matte	r to the following:	
	f Organization and fee(s) are si	•	
The analoged Anticles of	fOrcemination and facts) are a	shmitted for filing	
		l Liability Company)	
SUBJECT:	Glen HQ, LLC		
Division of Co			
TO: Registration Se	ection		

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

Registration Section **Division of Corporations** P.O. Box 6327 Taliahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name:

The name of the Limited Liability Company is:					
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is					
Mailing Address:					
5773 Normandy Blvd.					
Jacksonville, Fl. 32205					
-					

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

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

Donald M. Johnson Jr.

Name

5773 Normandy Blvd.

Florida street address (P.O. Box NOT acceptable)

Jacksonville, Fl. 32205

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)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s	aging Member(s)	or Managing	Manager(s	ARTICLE IV-
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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"	Arnold J. Johns
	5773 Normandy Blvd.
	Jacksonville, Fl. 32205
"MGR"	Donald M. Johnson Jr.
	5773 Normandy Blvd.
	Jacksonville, Fl. 32205

(Use attachment if necessary)	
NOTE: An additional article m	ust be added if an effective date is requested.
REQUIRED SIGNATURE:	
X /	MMALL
Signature of a me	mber or an authorized pepresentative of a member.
of this document of	th section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury ted herein are true.)
Donald M. John	son Jr.

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)