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| (Re | questor's Name) | <u></u> |
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| (Ad | dress) | |
| (0,4 | dress) | |
| un) | uress) | |
| (Cit | y/State/Zip/Phone | : #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nam | ne) |
| | | |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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TRANSMITTAL LETTER

| TO: Registration Sec Division of Cor | | . ·- | | | |
|---|---|---|---|-------------------|------------------|
| SUBJECT: Florida La | nd Development and Inves | tment, LLC | | | |
| | | l Liability Company) | | - | |
| The enclosed Articles of | Organization and fee(s) are su | abmitted for filing. | | | |
| Please return all correspo | ondence concerning this matter | r to the following: | | | |
| Rachel T | | Name of Person) | •44- | | |
| Clayton H. Blanchard | 1.ir PA | | | | |
| Olayton 11. Dianonare | | Firm/Company) | | | |
| | | | | | |
| 35 E. Pinehu | ırst Blvd. | | | | |
| | | (Address) | | | |
| Eustis | ;, Florida 32726 | | | | |
| | (City/ | State and Zip Code) | | = - | <u> </u> |
| For further information of | concerning this matter, please | call: | | SECTION ALLANA | 02 KU 57 PM 5:38 |
| Rachel Tyre | | at (352) 589-1919 > (Area Code & Daytime To | (4 | | 4 |
| (Name | of Person) | (Area Code & Daytime To | elephone Number) | 1 5 50 8 50 | <u></u> |
| Enclosed is a check fo | r the following amount: | | | TAT ADA | ;; 38 |
| □ \$125.00 Filing Fee | ☐ \$130.00 Filing Fee & Certificate of Status | | ☐ \$160.00 Filin Certificate of Sta Certified Copy (additional copy is e | atus & | |

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Nam The name of the Lin | ne: mited Liability Company is: | | | | |
|---|---|-------------------------|--|--|--------------------------|
| Florida Land Develop | ment and Investment, LLC | | | | |
| ARTICLE II - Add The mailing address | dress: s and street address of the pri | ncipal o | ffice of the Limi | ted Liability Compa | ny is: |
| Principal Office A | ddress: | Mailin | g Address: | | |
| 35 E. Pinehurst Blvd. | | 35 E. Pi | inehurst Blvd. | | |
| Eustis, Florida 32726 | <u> </u> | Eustis, | Florida 32726 | | |
| The name and the F | egistered Agent, Registered Clorida street address of the re Clayton H. Blanchard, Jr. | | | gent's Signature: | |
| | Name | | | • | |
| | 35 E. Pinehurst Blvd. | | | A | 05 |
| | Florida street add | ress (P.O. | Box NOT acceptab | le) $\frac{1}{2}$ | 05 AUG 29 |
| | Eustis | FL | 32726 | | 23 |
| | City, State, as | nd Zip | | Maria O | |
| liability compan registered agent an | ed as registered agent and to a ny at the place designated in th nd agree to act in this capacity to the proper and complete per | his certif . I furth | icate, I hereby ac er agree to comp | cept the appointment ly with the provision: | t a š. s ofall |

Registered Agent's Signature

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

(CONTINUED)

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

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

| Title: "MGR" = Manager "MGRM" = Managing Member | Name and Address: | |
|---|---|-------------|
| MGR | Clayton H. Blanchard, Jr. 35 E. Pinehurst Blvd. Eustis, Florida 32726 | <u>_</u> |
| | | |
| | | <u> </u> |
| | | <u> </u> |
| (Use attachment if necessary) | | |
| NOTE: An additional article must be | added if an effective date is requested. | |
| REQUIRED SIGNATURE: | 21 | |

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.)

Clayton H. Blanchard, Jr.

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)