L05000100006

(Re	questor's Name)	
(Ad	dress)	
•	•	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu:	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	Certificates	of Status
• • • • • • • • • • • • • • • • • • • •	•	
Special Instructions to I	Filing Officer:	
		i
		ļ

Office Use Only



300059107213



10/06/05--01058--025 **125.00

FILED

05 OCT -6 PM 1: 37

SECRETARY OF STATE
ALLAHASSEF FI OBINA

EBurch ULI 1 1 ZUUD

COVER LETTER

TO: Registration So Division of Co			
SUBJECT:	Ponte Vedra l	and Group, LLC	
SUBJECT:		d Liability Company)	
The enclosed Articles o	f Organization and fee(s) are so	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
	Charles	G. Denton	
	0	Name of Person)	
	(Firm/Company)	
	228 Sea	a Coast Lane	
		(Address)	
	Ponte V	edra Beach, FL	32082
<u></u>		/State and Zip Code)	02002
For further information	concerning this matter, please	call:	
Charle	s G. Denton	at (904) 280-44	07
	e of Person)	(Area Code & Daytime T	
Employed in a shoot f	andle fallouing amounts		
	or the following amount:	—	—
✓ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy	Shows the state of Status &
		(additional copy is enclosed)	Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section	Street/Courier Address Registration Section	<u>ss</u>
	Division of Corporations	Division of Corporatio	ns
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center	· Circle
	1 anjuna0500, 1 D 52517	Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Lim	ited Liability Company is:		
Ponte Vedra Lar (Must end with the words "I		d Company" or their abbreviation "LLC,"	" or "L.C.,")
ARTICLE II - Addr The mailing address		incipal office of the Limited Lis	ability Company is:
Principal Office Add	<u>dress:</u>	Mailing Address:	EFFECTIVE DATE
228 Sea Coast Lane Ponte Vedra Beach,		228 Sea Coast Lane Ponte Vedra Beach, FL 3208	20-07-05
(The Limited Liability Combusiness entity with an acti	oany cannot serve as its own Registe ve Florida registration.)	Office, & Registered Agent's ered Agent. You must designate an indivi	
	orida street address of the re	gistered agent are:	95 (SEC
_	Charles G. Denton Name	. = <u></u>	AHA
_ :	228 Sea Coast Lane Florida street add		ILED -6 PH -6 PH -6 PH -6 PH

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 (REQUIRED)

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

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

Charles G. Denton 228 Sea Coast Lane Ponte Vedra Beach, FL 32082 Connie L. Shifflet P.O. Box 266 Satsuma, FL 32189	- ·
228 Sea Coast Lane Ponte Vedra Beach, FL 32082 Connie L. Shifflet P.O. Box 266 Satsuma, FL 32189	- ·
228 Sea Coast Lane Ponte Vedra Beach, FL 32082 Connie L. Shifflet P.O. Box 266 Satsuma, FL 32189	- ·
Ponte Vedra Beach, FL 32082 Connie L. Shifflet P.O. Box 266 Satsuma, FL 32189	- ·
Connie L. Shifflet P.O. Box 266 Satsuma, FL 32189	- ·
P.O. Box 266 Satsuma, FL 32189	- - -
P.O. Box 266 Satsuma, FL 32189	- - -
	- - -
	_
•	
'''''''''''''''''''''''''''''''''''''	_
	<u></u>
	_
of filing: October 3, 2005 (OPTIO	DNAL'
	of filing: October 3, 2005 (OPTIC

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.)

Charles G. Denton

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)