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CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 750403 81034A

AUTHORIZATION : *SA*

COST LIMIT : \$ 155.00

ORDER DATE : December 12, 2005

ORDER TIME : 11:08 AM

ORDER NO. : 750403-005

CUSTOMER NO: 81034A

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TALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: DESTIN SUGARLOAF, LLC

EFFECTIVE DATE:

_____ ARTICLES OF INCORPORATION
_____ CERTIFICATE OF LIMITED PARTNERSHIP
XX_____ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX_____ CERTIFIED COPY
_____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea - EXT. 2914

EXAMINER'S INITIALS: _____

ARTICLES OF ORGANIZATION

OF

DESTIN SUGARLOAF, LLC

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TALLAHASSEE, FLORIDA

ARTICLE I ~ Name

The name of the limited liability company is **DESTIN SUGARLOAF, 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:

☒ Same as Principal
Office Address

24 Walter Martin Road
Fort Walton Beach, FL 32548

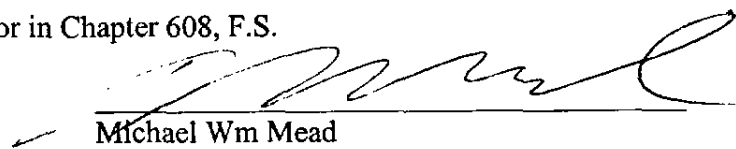
but it shall have the power and authority to establish branch offices at such place or places
as may be designated by the members.

**ARTICLE III ~ Registered Agent, Registered Office
& Registered Agent's Signature**

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

Michael Wm Mead
24 Walter Martin Road
Fort Walton Beach, Florida 32548

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.


Michael Wm Mead
(Registered Agent's Signature)

ARTICLE IV ~ Management

- ☒ This Limited Liability Company is a member-managed company.
- ☐ This Limited Liability Company is a manager-managed company.

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

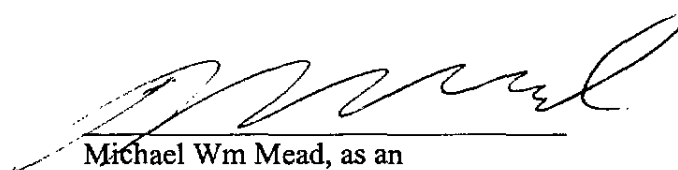
Title: _____ **Name and Address:** _____
"MGR" = Manager
"MGRM" = Managing Member

TITLE "MGR" = Manager "MGRM" = Managing Member	Name and Address
MGRM	The Green Group of NWF, Inc. 24 Walter Martin Road, Fort Walton Beach, FL 32548

ARTICLE V ~ Effective Date

- ☒ The filing shall be effective as of the date of filing.
- ☐ The effective date, if other than the date of filing, shall be
the ____ day of _____, 2005.

And said effective date (if listed above) is a specific date
not more than five (5) business days prior to or ninety (90) days
after the date of filing.



Michael Wm Mead, as an
Authorized Representative of a Member

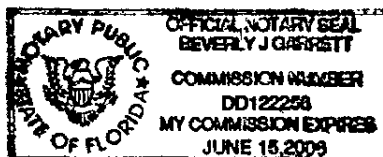
In accordance with §608.408(3) Florida Statutes, the execution of this document
constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Michael Wm Mead
Typed or printed name of signee

STATE OF FLORIDA
COUNTY OF OKALOOSA

The foregoing instrument was acknowledged before me this 9th day of December,
2005 by Michael Wm Mead, who is personally known to me.


Notary Public
My Commission Expires:



MICHAEL WM MEAD
ATTORNEY AT LAW
24 WALTER MARTIN ROAD
P O, DRAWER 1329
FORT WALTON BEACH,
FLORIDA 32549 1329

LLC\ approved LLC
Articles of Organization
MWM agent / Member-managed LLC