

L0600000092699

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

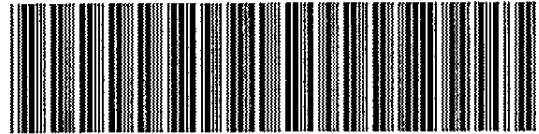
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/20/06--01033--027 **155.00

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TALLAHASSEE, FLORIDA

msf

VANNES

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Attorneys at Law

THE POWER OF KNOWLEDGE

September 14, 2006

Corporate Records Bureau
Division of Corporations
Department of State
Post Office Box 6327
Tallahassee, FL 32314

Re: Nature Coast Properties, L.L.C.

Dear Madam or Sir:

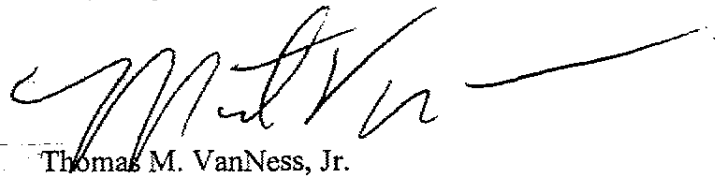
Enclosed you will find a check in the amount of \$155.00 to cover the following fees of your office.

Filing Articles of Organization	\$100.00
Certification of Articles	\$ 30.00
Filing Resident Agent Form	\$ 25.00

We enclose the original and one copy of the Articles of Organization for this proposed Limited Liability Company together with an executed resident agent form. Please endorse your approval on the copy of the Articles of Organization, certify same and return to us, together with acknowledgment of filing of resident agent.

Thank you for your attention to the above.

Very truly yours,



Thomas M. VanNess, Jr.

TMV:btI
Enclosures

**ARTICLES OF ORGANIZATION OF
Nature Coast Properties, L.L.C.**

ARTICLE I. NAME

The name of the Limited Liability Company ("Company") Nature Coast Properties, L.L.C.

ARTICLE II. PURPOSE

The purpose of this Limited Liability Company may include the transaction of any and all lawful business for which Limited Liability Companies may be organized in the State of Florida.

ARTICLE III. ADDRESS

The mailing and street address of the Company's principal office is **1095 North Circle Drive, Crystal River, Florida 34429.**

ARTICLE IV. MEMBERS AT TIME OF FORMATION

There shall be at least one member at the time the limited liability company is formed. The member at the time of formation is:

BARBARA L. McKINNON	1095 North Circle Drive Crystal River, Florida 34429
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ARTICLE V. DURATION

The period of duration for the Company is perpetual, unless sooner terminated, beginning on the date these Articles of Organization are filed by the Florida Department of State.

ARTICLE VI. REGISTERED AGENT AND OFFICE

The name of the Company's initial Registered Agent in Florida is **BARBARA L. McKINNON**. The address of the Company's registered office in Florida is **1095 North Circle Drive, Crystal River, Florida 34429.**

ARTICLE VII. MANAGEMENT

The Company is to be managed by the member. The managing member is identified as follows:

BARBARA L. McKINNON	1095 North Circle Drive Crystal River, Florida 34429
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ARTICLE VIII. ADMISSION OF NEW MEMBERS

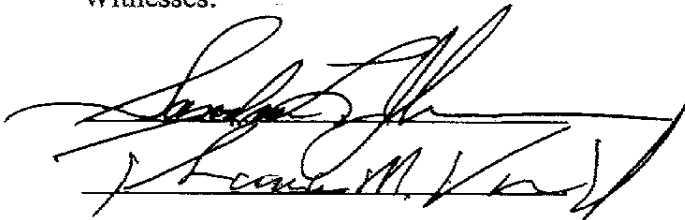
Members of the Company have the right to admit new members. Additional members may be admitted only on the unanimous written consent of the existing members and the existing members shall determine the amount and nature of contributions by new members at the time the new members are admitted.

ARTICLE IX. MEMBERS RIGHT TO CONTINUE BUSINESS

The remaining members of the Company have the right to continue the business on the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Company. The business may be continued only on the unanimous written consent of the remaining members.

IN WITNESS WHEREOF, these Articles of Organization have been executed on this 12th day of September, 2006, at Crystal River, Citrus County, Florida.

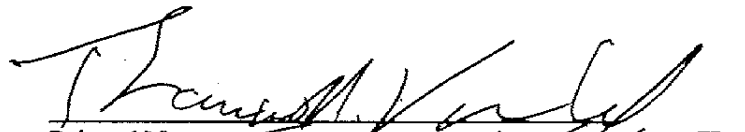
Witnesses:


BARBARA L. MCKINNON

"MEMBER"

STATE OF FLORIDA
COUNTY OF CITRUS

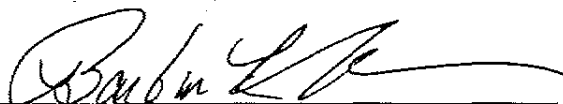
The foregoing instrument was acknowledged before me this 12th day of September 2006, by BARBARA L. McKinnon, as the Member to these Articles of Organization. Said person did not take an oath and (check one) ☐ is personally known to me, ☒ produced a driver's license (issued by a state of the United States within the last five (5) years) as identification, or produced other identification, to wit: _____.


Printed Name: Thomas M. Velez, Jr.
NOTARY PUBLIC State of Florida
Commission # _____
My Commission Expires: _____

**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE
FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT
UPON WHOM PROCESS MAY BE SERVED.**

**IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE
FOLLOWING IS SUBMITTED:**

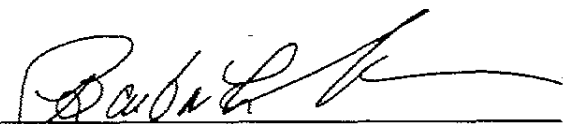
**FIRST-- THAT Nature Coast Properties, L.L.C. DESIRING TO ORGANIZE OR
QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS PRINCIPAL PLACE
OF BUSINESS AT CITY OF CRYSTAL RIVER, CITRUS COUNTY, STATE OF FLORIDA,
HAS NAMED BARBARA L. McKINNON, LOCATED AT 1095 NORTH CIRCLE DRIVE,
CITY OF CRYSTAL RIVER, STATE OF FLORIDA, AS ITS AGENT TO ACCEPT SERVICE
OF PROCESS WITHIN FLORIDA.**

SIGNATURE 
BARBARA L. McKINNON, Member

TITLE MANAGING MEMBER

DATE 9.12.06

**HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE
STATED L.L.C., AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE
TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE
PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE
PERFORMANCE OF MY DUTIES.**

SIGNATURE 
BARBARA L. McKINNON
Resident Agent

DATE 9.12.06

FILED
06 SEP 20 PM 4:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA