01000003460

(代6	equestor's Name)	
(Ac	ldress)	
(Ad	(dress)	
(Cit	ty/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
— —		_
(Bu	siness Entity Nam	ie)
(Dc	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



400082736134

01/10/07--01021--005

**130.00

SECRETARY OF STALL ARRASSEE. FI CO

TO ACKNOWLEDGE

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

67-34860

		
•		
, Cooper byen	e. Pilc	
	equestor's Name	_
3520 THOMAS	VILLE ROAD, SUITE 200	
	Address	
TALLAHASSEE	FL 32309 850-553-4300	,
City/Stat	e/Zip Phone #	–
		Office Use Only
CORPORATION	N NAME(S) & DOCUMENT N	UMBER(S), (if known):
1. Leogen (Emmunities at Vones	(Document #)
) /(c	rporation Name)	(Document#)
2	rporation Name)	(Document #)
	rporation readicy	(Domining)
3 (C a	orporation Name)	(Document #)
	•	(Document #)
4(C	orporation Name)	(Document #)
Walk in Mail out	Pick up time Will wait Photocop	Certified Copy CECON TO THE PROPERTY OF STANDARD TO THE PR
		TARY ASS
NEW FIDINGS	AMENDMENTS	
Profit	Amendment	
NonProfit	Resignation of R.A., Officer/	Director 5H 33
Limited Liability	Change of Registered Agent	
Domestication	Dissolution/Withdrawal	
Other	Merger	
OTHERFILINGS	REGISTRATION/	
Annual Report	OVALIFICATION	
Fictitious Name	Foreign	_
Name Reservation	Limited Partnership	
,	Reinstatement	<u> </u>
'	Trademark	
	Other .	
		ـــا
	<u></u>	Examiner's Initials

ARTICLES OF ORGANIZATION

OF

LEGACY COMMUNITIES AT JONESBORO MEADOWS, LLC

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes (the "Florida Limited Liability Company Act"), for the purpose of forming a Limited Liability Company under the laws of the State of Florida do set forth the following:

1. NAME.

The name of the Limited Liability Company is LEGACY COMMUNITIES AT JONESBORO MEADOWS, LLC (hereinafter referred to as the "Company").

2. <u>PERIOD OF DURATION</u>.

The period of duration of the Company shall be from the date of filing of its Articles of Organization until the first to occur of the following:

- i) The date that is seventy-five (75) years from the date of filing of the Articles of Organization with the Department of State, State of Florida; or S
- (ii) Dissolution of the Company pursuant to the provisions of the Florida Limited
 Liability Act; or
- (iii) By the mutual written agreement of a majority in capital interest of the Members.

PURPOSE.

The purpose for which the Company is organized is to engage in any and all businesses and activities permitted by the laws of the State of Florida. The Company shall have all of the powers vested in a limited liability company organized and existing by virtue of such laws.

4. ADDRESS OF PLACE OF BUSINESS.

The mailing address and the street address of the place of business for the Company is 3520 Thomasville Road, Suite 200, Tallahassee, Florida 32309. Such address may be changed from time to time as provided in the Operating Agreement.

5. **REGISTERED AGENT.**

The initial registered agent in Florida for the Company is Charles L. Cooper, Jr., and the initial registered office is located at 3520 Thomasville Road, Suite 200, Tallahassee, Florida 32309.

The Registered Agent of the Company accepts such appointment solely for purposes of satisfying the requirements of Chapter 608.415, Florida Statutes. The Company and its officers, directors and shareholders understand and agree that the Registered Agent shall use his best reasonable efforts to timely forward to the Manager of the Company, or his written designee, all correspondence, notices and summonses received by the Registered Agent; provided, however that the Registered Agent shall have no other duty to respond to any such matters, or take any action, without the prior written instruction of the Company.

6. ADDITIONAL MEMBERS.

The Company shall have at least one (1) member, and may admit additional members upon the prior unanimous written agreement of the then existing members, or as otherwise provided in the Operating Agreement.

7. **CONTINUITY OF BUSINESS.**

Upon 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 of the Company shall be continued and the Company shall not be dissolved without the prior written consent of all the remaining members of the Company.

8. MANAGEMENT.

Management of the Company shall be by its Members, in the manner provided for in the Operating Agreement.

9. INDEMNIFICATION.

Except as expressly provided otherwise in the Operating Agreement, the Company shall indemnify any member or Manager to the full extent permitted under the Florida Limited Liability Company Act.

Executed this & day of Lanuary, 2007. By-LEGACY COMMUNITIES, LLC, a Florida limited liability company By its Manager, Legacy Communities Group, Inc., a Florida corporation Stephen F. Been, Its President Its: Member Manager

ACCEPTANCE BY REGISTERED AGENT

Having been appointed the registered agent of LEGACY COMMUNITIES AT JONESBORO MEADOWS, LLC, the undersigned accepts such an appointment, agrees to act in such capacity and accepts the obligations proposed by Florida Statutes Section 608.415 and is herewith simultaneously designated as registered agent by LEGACY COMMUNITIES AT JONESBORO MEADOWS, LLC.

Executed this 10 day of 2007.

 $\alpha \wedge \alpha$

CHARLES L. COOPER, JR., RECASTERED

AGENT

FOR THE LIMITED LIABILITY COMPANY:

_್ ಬ್	20
-m	9
>20 c/m	2007 JAN
⋧⋝	
ე~~	0
150 J	0_
- 07	<u>~</u>
ર્ટ∑	. <u>.</u> မှု
تات	~~
	SECRETARY OF STATE