### **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H07000065875 3)))



H070000658753ABC5

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : MATTHEWS & HAWKINS, P.A.

Account Number : 119990000039 : (850)837-3662 Phone

: (850)654-1634 Fax Number

## FLORIDA/FOREIGN LIMITED LIABIL

Destiny Dream Home, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

### ARTICLES OF ORGANIZATION FOR DESTINY DREAM HOME, LLC a Florida Limited Liability Company

#### ARTICLE I NAME

The name of the Limited Liability Company is Destiny Dream Home, LLC

# ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

6928 Cobblestone Drive Suite 200 Southaven, MS 38672

Post Office Box 165 Southanve, MS 38671

ARTICLE III

REGISTERED AGENT, REGISTERED OFFICE AND REGISTERED AGENT'S SIGNATURE

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

Scott M. Work, Esq. Matthews & Hawkins, P.A. 4475 Legendary Drive Destin, Florida 32541

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 in 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.

Scott M. Work

Registered Agent

# ARTICLE IV MANAGEMENT

The company shall be managed by a manager in accordance with regulations adopted by the members for the management of the business and affairs of the company. These regulations may contain any provisions for the regulation and management of the affairs of the company not inconsistent with law or these articles of organization. The name and address of the initial manager of the company is:

Hal S. Mullins Post Office Box 165 Southaven, Mississippi 38671

DESTINY DREAM HOME, LLC

Scott M. Work, Its Incorporator

PILED

2001 MAR 13 A 9: 07

SECRETARY OF STATE
TALLAHASSEF F. STATE