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(Re	questor's Name)	
(Ad	dress)	
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(0)	(0) + 7' (0)	16
(Cit	y/State/Zip/Phon	ie #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	Certificate	s of Status
Special Instructions to	Filing Officer:	
		A
	Office Use Or	. "#



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W7-475102

TRANSMITTAL LETTER

TO: Registration Section Division of Corporation	ons		
SUBJECT:	FPF Condo, LLC		
	(Name of Limited Liability Company)		
The enclosed Articles of Orga	anization and fee(s) are submitted for filing.		
Please return all corresponder	nce concerning this matter to the following:		
Thomas	O. Kotouc		
(Name o	of Person)		
Thomas O. K.	otouc, P.C.		
(Firm/Co	ompany)		
2900 Zelda Ro	ad, Ste. A	2007 HAY SECRET	
(Address	:)		
Montgomer	y, AL 36106	ARYO ASSHE	
(City/Star	te and Zip Code)		
For further information concer	rning this matter, please call:	PMI2: 12 OF STATE E.FLORIDA	
Thomas O. Koto	at (334) 409-0088		
(Name of Person)	(Area Code & Daytime Telephone Numb	ber)	
STREET ADDRESS: Registration Section	MAILING ADDRESS: Registration Section		
Division of Corporations			
409 E. Gaines Street	P.O. Box 6327		
Tallahassee, Florida 32399	allahassee, Florida 32399 Tallahassee, Florida 32314		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE II - Address:			
The mailing address and street	address of the princip	al office of the Limited Liab	ility Company is:
Principal Office Address:		Mailing Address:	
330 Foxhall Road		330 Foxhall Road	
Pike Road, AL 36064		Pike Road, AL 3606	54
ARTICLE III - Registered A	gent, Registered Offi	ce, & Registered Agent's S	
The name and the Florida stree		-	2007 MAY
The name and the Florida stree	et address of the registe	-	
The name and the Florida stree	ot address of the register oe Denison Name	-	2001 MAY -2 SECRETARY TALLAHASSI
The name and the Florida stree	ot address of the register oe Denison Name	ered agent are:	2001 MAY -2 SECRETARY TALLAHASSI
1020	oe Denison Name South Ferdon a street address (P.O. Box	ered agent are:	2007 MAY

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

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manag "MGRM" = Manag	er	ame and Address:	
MGRM	Sur Manage	Mary Elizabeth Farris	
		330 Foxhall Road	
MGRM		Pike Road, AL 36064	
MOM		Harry W. Farris	
· · ·		1557 Valley View Circle	
	-	Birmingham, AL 35209	
MGR		Robert D. Farris	
		330 Foxhall Road	,
	·	Pike Road, AL 36064	
(Use attachment i:	••	led if an effective date is requeste	ed.
REQUIRED SIG	NATURE:		7AE 2001
	Signature of a member or an (In accordance with section 60 of this document constitutes at that the facts stated herein are	n authorized representative of a member 08.408(3), Florida Statutes, the execution in affirmation under the penalties of perjurctrue.)	PHI

Filing Fees:
\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)