

Division of Corporations Public Access System

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To:

Division of Corporations

: (850)205-0383 Fax Number

Account Name : A 1 A CORPORATE SERVICES, INC.

Account Number : 120010000247 : (800)494-3124

(305) 675-2811 Fax Number

FLORIDA/FOREIGN LIMITED LIABILITY CO.

LOT 19 BLACKSMITH RUN LLC

Certificate of Status	0
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DESCRIPTIONS

P. M. P. - KLOUR

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is: LOT 19 BLACKSMITH RUN LLC

ARTICLE II ADDRESS

The mailing address and street address of the principal office of the angles and street address of the principal office of the angles and the street address of the principal office of the angles and the street address of the principal office of the angles and the street address of the principal office of the angles and the street address of the principal office of the angles and the street address of the principal office of the angles and the street address of the principal office of the angles and the street address of the principal office of the angles and the street address of the principal office of the angles and the street address of the principal office of the angles and the street address of the principal office of the angles and the street address of the principal office of the angles and the street address of the principal office of the angles and the street address of the street

10185 COLLINS AVE # 918

BAL HARBOUR, FL 33154-1600

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & AND AREA REGISTERED AGENT SIGNATURE

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

MELANIE MOCHAN

10185 COLLINS AVE # 918

BAL HARBOUR, FL 33154-1600

Having been named as registered agent 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..

MELANIE MOCHAN Registered Agent's Signature

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PAGE 2 LOT 19 BLACKSMITH RUN LLC

ARTICLE IV MANAGEMENT

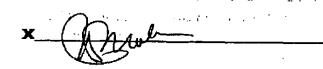
The Limited Liability Company is to be managed by one or more members and is, therefore, a Member-Managed Company.

ARTICLE V MEMBERS (optional)

MANAGING MEMBER
MELANIE MOCHAN
22 BLACK IRON LANE

HENDERSONVILLE NC 28792

DIVISION OF AUG 10 AM 8: 48



the transmission, at the second special a

Signature of a member or an authorized representative of a member. (In accordance with section 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.

NAME OF SIGNER MELANIE MOCHAN Typed or printed name of signee