

L07000095260

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

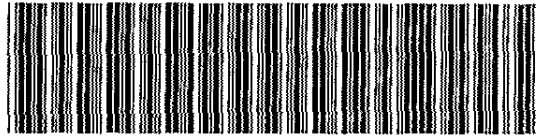
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STATE OF FLORIDA  
TALLAHASSEE

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07 SEP 18 AM 9:36

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# AUSLEY & McMULLEN

ATTORNEYS AND COUNSELORS AT LAW

227 SOUTH CALHOUN STREET  
P.O. BOX 391 (ZIP 32302) --  
TALLAHASSEE, FLORIDA 32301 ---  
(850) 224-9115 FAX (850) 222-7560

September 18, 2007

Secretary of State's Office  
Division of Corporations  
2661 Executive Center Circle West  
Tallahassee, Florida 32301

VIA HAND DELIVERY

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07 SEP 18 AM 9:36  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

RE: Chapel Trace, LLC

Dear Sir or Madam:

Enclosed for filing are Articles of Organization for the above-referenced company and our check for \$155.00. Also enclosed is an extra copy of the Articles for the certified copy. Please call Chris Vause at 425-5446 when the certified copy is ready to be picked-up.

Thank you for your assistance.

Sincerely,



Chris Vause  
Secretary to Robert A. Pierce

/cv  
Enclosures

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**ARTICLES OF ORGANIZATION  
OF  
CHAPEL TRACE, LLC**

The undersigned, pursuant to the provisions of Chapter 608, Florida Statutes, provides the following information for the purpose of forming a Limited Liability Company under the laws of the State of Florida.

**ARTICLE 1.  
Name**

The name of the Limited Liability Company is **CHAPEL TRACE, LLC.**

**ARTICLE 2.  
Address**

The street and mailing address of the place of business in Florida is:

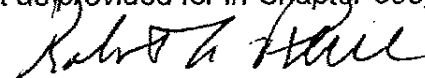
2452 Mahan Drive  
Tallahassee, Florida 32308

**ARTICLE 3.  
Registered Agent and Registered Office**

The name and Florida street address of the initial registered agent in Florida for the Limited Liability Company are:

**Robert A. Pierce**  
227 South Calhoun Street  
Tallahassee, Florida 32301

*Having been named as registered agent and as the person to accept service of process for the above-stated limited liability company at the place designated in these Articles, 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, Florida Statutes.*

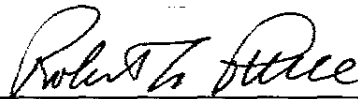


**Robert A. Pierce, Registered Agent**

**FILED**  
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TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 18<sup>th</sup> day of September, 2007.

IN ACCORDANCE WITH SECTION 608.408(3), FLORIDA STATUTES, THE EXECUTION OF THIS DOCUMENT CONSTITUTES AN AFFIRMATION UNDER PENALTIES OF PERJURY THAT THE FACTS STATED HEREIN ARE TRUE.



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**Robert A. Pierce**  
As Authorized Representative