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**EXAMINER** 

## **COVER LETTER**

TO:

Registration Section

Division of Corporations				
SUBJECT: Providence Developers, L	LC		125 08 V	<b>1</b>
(Name of Limited	l Liability Compa	ny)	5.6%	
The enclosed Articles of Organization and fee(s) are surely Please return all correspondence concerning this matter	_		THE PERCENT	KIL BULLE
rease remain an correspondence concerning and matter	i to the following.			6 % C
Michael Hervey				Alle
0	Name of Person)			P
Affordable Housing Solutions	s Tallahass	ee, LLC		
	Firm/Company)			
P.O. Box 12395				
	(Address)			
Tallahassee, FL 32317-2395	5			
(City)	State and Zip Code	)	·	
For further information concerning this matter, please	call:			
Michael Hervey	at ( 850.	766-9004		
(Name of Person)	(Area Code	& Daytime Teleph	one Number)	
Enclosed is a check for the following amount:				
\$125.00 Filing Fee \$\times\$130.00 Filing Fee & Certificate of Status	\$155.00 Filin Certified Cop (additional copy	by (	160.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)	
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division Clifton B	of Corporations	le	

Tailahassee, FL 32301

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	2 % A
The name of the Limited Liability Company	is:
Providence Developers, LLC	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(Must end with the words "Limited Li	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	Contract of the contract of th
The mailing address and street address of the	e principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
Providence Developers, LLC	Affordable Housing Solutions Tallehassee, LLC
1120 Stuckey Avenue	P.O. Box 12395
Tallahassee, FL 32304	Tallahassee, FL 32317-2395
(The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.)	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another
The name and the Florida street address of the	ie registered agent are:
Michael Hervey	
Na	me
2661 Noble Drive	
Florida street	address (P.O. Box NOT acceptable)

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 (REQUIRED)

Tallahassee, 32308 <sub>FL</sub> City, State, and Zip

(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:

1400*		Attalonal December
'MGR"	<del></del>	Michael Hervey P.O. Box 12395
		Tallahassee, FL 32317-2395
"MGR"		John Whetsel
		2365 Centerville Road
		Tallahassee, FL 32308
,	_	
(Use attachment	t if necessary)	
LE V: Effective fective date is li days after the d	sted, the date must l	e date of filing: (OPTION be specific and cannot be more than five business da
	IGNATURE:	

(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.)

# Michael Hervey

Typed or printed name of signee

#### Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)