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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

FILED

COVER LETTER

TO: Registration Division of	n Section Corporations		
SUBJECT:	MTN Vill	age 1, LLC	
	(Name of Limite	d Liability Company)	
The enclosed Articles	of Organization and fee(s) are s	ubmitted for filing.	
Please return all corre	espondence concerning this matte	er to the following:	
	Hal Ma	arston	
	(Name of Person)	
	MTN Vil	lage 1, LLC	
	((Firm/Company)	
	1530 Che	estnut Avenue	Z S TAL
 		(Address)	ECR LAI
	Winter P	ark, FL 32789	HAY Z
<u> </u>	(City	/State and Zip Code)	22 E.C. 22
For further information	on concerning this matter, please	call:	P 3: F STAT FLORI
Hal Mar	ston	at (407) 497-12	
(Na	me of Person)	(Area Code & Daytime Telep	hone Number)
Enclosed is a check	for the following amount:		
\$125.00 Filing Fee	Section 130.00 Filing Fee & Certificate of Status		\$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	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Cir Tallahassee, FL 32301	rcle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Ŋ	ITN Village 1, LLC	
	the words "Limited Liability Company, "I	L.L.C.," or "LLC.")
ARTICLE II - Address:		
The mailing address and st	eet address of the principal offic	e of the Limited Liability Company
Principal Office Address	Mailing A	Address:
	4500.01	stnut Avenue
1530 Chestnut Avenue	1530 Ches	
(The Limited Liability Company ca	d Agent, Registered Office, & I	k, FL 32789 Registered Agent's Signature:
ARTICLE III - Registere (The Limited Liability Company can business entity with an active Flori	d Agent, Registered Office, & I	Registered Agent's Signature: u must designate an individual or another
ARTICLE III - Registere (The Limited Liability Company can business entity with an active Flori	Winter Par d Agent, Registered Office, & I anot serve as its own Registered Agent. You da registration.) treet address of the registered age	Registered Agent's Signature: u must designate an individual or another
ARTICLE III - Registere (The Limited Liability Company can business entity with an active Flori	Winter Par d Agent, Registered Office, & I anot serve as its own Registered Agent. You da registration.)	Registered Agent's Signature: u must designate an individual or another
ARTICLE III - Registere (The Limited Liability Company can business entity with an active Flori	Minter Par d Agent, Registered Office, & I unot serve as its own Registered Agent. You da registration.) treet address of the registered age Hal Marston Name	Registered Agent's Signature: u must designate an individual or another ent are: VALCAHASSEE ACCRETARY ACCR
ARTICLE III - Registere (The Limited Liability Company can business entity with an active Flori	Winter Par d Agent, Registered Office, & I anot serve as its own Registered Agent. You da registration.) treet address of the registered age Hal Marston	Registered Agent's Signature: u must designate an individual or another ent are: TALLAHAS SEE AHAS SEE
ARTICLE III - Registere (The Limited Liability Company can business entity with an active Flori	Winter Par d Agent, Registered Office, & I anot serve as its own Registered Agent. You da registration.) treet address of the registered age Hal Marston Name 1530 Chestnut Aven	Registered Agent's Signature: u must designate an individual or another ent are: NOT acceptable) Registered Agent's Signature: SECRETARY OF SIGNATURE NOT acceptable)

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature (REQUIRED)

(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: Name and Address: "MGR" = Manager "MGRM" = Managing Member **MGRM** Hal Marston 1530 Chestnut Avenue Winter Park, FL 32789 **MGRM** Josie Marston 1530 Chestnut Avenue Winter Park, FL 32789 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: _ (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** 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.) Hal Marston

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)

Typed or printed name of signee