Division of Corporations Public Access System

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(((H08000158358 3)))



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Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

; FOLEY & LARDNER

Account Number : 072720000061 Phone

(904)359-2000

Fax Number

(904)359-8700

FLORIDA/FOREIGN LIMITED LIABILITY CO.

NUTTER INVESTMENTS, LLC

Certificate of Status 0 Certified Copy 1 Page Count 01 Estimated Charge \$155.00

A. LUNT XAMINER

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Corporate Filing Menu

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ATTORNEYS AT LAW
ONE INDEPENDENT DRIVE, SUITE 1300
JACKSONVILLE, FLORIDA 32202-5017
P. O. BOX 240
JACKSONVILLE, FLORIDA 32201-0240
TELEPHONE: 904.359 2000
FACSIMILE: 904.359.8700
WWW.FOLEY.COM

FACSIMILE TRANSMISSION

Total # of Pages 2 (not including this page)

TO:	PHONE#:	FAX#:
LLC Formation FL Secretary of State	850.245.6939	850.617.6383

From:	vhodge	•
Email Address:	VHodge@foley.com	
Sender's Direct Dial:	904.359.2000	
Date:	6/24/2008	
Client Matter No:	048858-0103	
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MESSAGE:

Please see attached.

SECRETARY OF STATE

CONFIDENTIALITY NOTICE: THE INFORMATION CONTAINED IN THIS FACSIMILE MESSAGE IS INTENDED ONLY FOR THE PERSONAL AND CONFIDENTIAL USE OF THE DESIGNATED RECIPIENTS NAMED ABOVE. THIS MESSAGE MAY BE AN ATTORNEY-CLIENT COMMUNICATION, AND AS SUCH IS PRIVILEGED AND CONFIDENTIAL. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT OR ANY AGENT RESPONSIBLE FOR DELIVERING IT TO THE INTENDED RECIPIENT YOU ARE HEREBY NOTIFIED THAT YOU HAVE RECEIVED THIS DOCUMENT IN ERROR, AND THAT ANY REVIEW, DISSEMINATION, DISTRIBUTION OR COPYING OF THIS MESSAGE IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE AND RETURN THE ORIGINAL MESSAGE TO US BY MAIL. THANK YOU.

Fax Audit No. H08000158358 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE ! - Name:

The name of the Limited Liability Company is: NUTTER INVESTMENTS, LLC.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company are: 2749 Forest Circle, Jacksonville, Florida 32257.

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature;

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

W. Lee Nutter

Name

2749 Forest Circle

Florida street address (P.O. Box NOT acceptable)

Jacksonville, Florida 32257

City, State, and Zip

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 completed 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.

W. Lee Nutter

W. Lee Nutter

An additional article must be added if an effective date is requested)

X

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.)

W. Lee Nutter, Member
Typed or printed name of signee

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)