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COVER LETTER

10:	Division of Co				
SUBJ	ECT. AFFO	RDABLE HOUSIN	IG COALITION, L.L.C.		
50 50		(Name of Limit	ted Liability Company)		
The er	nclosed Articles o	of Organization and fee(s) are	submitted for filing.		
Please	return all corres	pondence concerning this mat	tter to the following:		
	ROBERT	L. KRAUSE			
			(Name of Person)		
	AFFORD	ABLE HOUSING	COALITION, L.L.C.		
			(Firm/Company)	08	SEC
	PO BOX	455		08 001 30	AHA
			(Address)	30	ARY
	TALLAHA	SSEE, FL 32302		PH	E E
		(Ci	ty/State and Zip Code)	2: 35	ORID
For fu	rther information	concerning this matter, pleas	e call:	_	Þ
ROE	BERT L. K	RAUSE	at (850) 524 - 9960		
	(Name	e of Person)	(Area Code & Daytime Telephone ?	Number)	
Enclo	sed is a check f	or the following amount:			
]\$125	.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy Certi (additional copy is enclosed) Certi	00 Filing Fee, ficate of Status & fied Copy ional 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 Circle Tallahassee, FL 32301		١

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:
AFFORDABLE HOUSING COALITION, L.L.C. (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC."

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:	
6761 PROCTOR RD	PO BOX 455	
TALLAHASSEE, FL 32309	TALLAHASSEE, FL 32302	
(The Limited Liability-Company cannot serve as it business entity with an active Florida registration	•	or another
The name and the Florida street address of ROBERT L. KR.		CRETAR LAHASS OCT 30
	Name	in -<
6761 PROCT	OR RD	20 0F 81 E.F.LG PH 2:
Florid	la street address (P.O. Box NOT acceptable)	OR S
TALLAHASSE	EE, FL 32309	.51 DA

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)

City, State, and Zip

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

		Name and Address:	
"MGR" = Mana			
"MGRM" = Ma	naging Member		
MGR M		ROBERT L. KRAUSE	
		6761 PROCTOR RD	
		TALLAHASSEE, FL 32309	
<u></u>			
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		-	
(Has attacker and	:: :		
(Use attachment	t if necessary)		· · · · ·
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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)