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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M. THOMAS

FEB - 3 2009

EXAMINER

HURD, HORVATH & ROSS, P.A.

ATTORNEYS AT LAW
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January 29, 2009

Department of State
Division of Corporations
Corporate Filings
P. O. Box 6327
Tallahassee, Florida 32314

Re: MOSLER FAMILY 1, LLC

Dear Sir/Madam:

Enclosed for filing, please find the following:

1. An original and one copy of the Articles of Organization for MOSLER FAMILY 1, LLC.
2. Certificate of Designation of Registered Agent and Registered Office for MOSLER FAMILY 1, LLC.

Attached to the above-referenced Articles of Organization is a filing fee check in the amount of \$160.00 for the following:

- | | | |
|----|-----------------------|----------|
| 1. | Filing fee | \$100.00 |
| 2. | Registered Agent fee | \$ 25.00 |
| 3. | Certified record fee | \$ 30.00 |
| 4. | Certificate of Status | \$ 5.00 |

Please return a certified copy of the Articles of Organization and a Certificate of Status in the enclosed, stamped, self-addressed envelope.

Should you have any questions, or need any further information, please contact me immediately. Thank you for your assistance in this matter.

Very truly yours,


ROGER C. HURD

RCH/pr
Enclosures

V:\Mosler Sue Ellen\LLC\Division of Corporations L1.wpd

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09 FEB -2 PM 1:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION

OF

MOSLER FAMILY 1, LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby, makes, acknowledges, and files the following Articles of Organization.

ARTICLE I--NAME

The name of the limited liability company shall be MOSLER FAMILY 1, LLC ("Company").

ARTICLE II--ADDRESS

The mailing address of the principal office of the Company is: 175 Oneida Street, St. Augustine, FL 32086, and the street address of the principal office of the Company is: 175 Oneida Street, St. Augustine, FL 32086.

ARTICLE III--REGISTERED AGENT

The name and street address of the registered agent of the Company for services of process in the state is: Sue-Ellen Gamble Mosler, 175 Oneida Street, St. Augustine, FL 32086.

ARTICLE IV--MANAGEMENT

The Company shall be managed by a manager in accordance with the operating agreement adopted by the members for the management of the business and affairs of the Company. The operating agreement may contain any provisions for the regulation and management of the affairs of the Company not inconsistent with law or these Articles of Organization. The name and address of the initial manager is: Sue-Ellen Gamble Mosler, 175 Oneida Street, St. Augustine, FL 32086.

ARTICLE V--MEMBERSHIP RESTRICTIONS

Members shall have the right to admit new members by unanimous consent. Contributions required of new members shall be determined as of the time of admission to the Company.

A member's interest in the Company may not be sold or otherwise transferred except with unanimous written consent of all members.

Executed by the undersigned at Palm Beach Gardens, Florida on the 22 day of January, 2009.



Sue-Ellen Gamble Mosler

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FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA


**CERTIFICATE OF DESIGNATION OF REGISTERED AGENT
AND REGISTERED OFFICE**

STATE OF FLORIDA
COUNTY OF PALM BEACH

Pursuant to the provisions of Sections 608.415 and 608.407(1)(c) of the Florida Limited Liability Company Act, MOSLER FAMILY 1, LLC submits the following statement to designate its registered office and registered agent in the State of Florida:

1. The name of limited liability company is MOSLER FAMILY 1, LLC
2. The registered agent for MOSLER FAMILY 1, LLC is Sue-Ellen Gamble Mosler and the street address of the registered office where the agent is located is 175 Oneida Street, St. Augustine, FL 32086.
3. This statement is to acknowledge that MOSLER FAMILY 1, LLC has appointed me as its registered agent to accept service of process for the limited liability company at the place designated above in this certificate. I accept this 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.

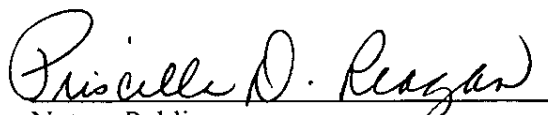
FURTHER AFFIANT SAYETH NAUGHT.


Sue-Ellen Gamble Mosler

STATE OF FLORIDA
COUNTY OF PALM BEACH

The foregoing instrument was sworn to and subscribed before me this 22nd day of January, 2009, by Sue-Ellen Gamble Mosler, who ☒ is personally known or ☐ has produced a driver's license as identification.




Notary Public
Printed Name: _____
My Commission Expires: _____