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TALLAHASSEE, FLORIDA

J. BRYAN
JUL - 2 2009
EXAMINER

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Hubert Clinton Reynolds, Jr. Funeral Home
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Hubert Clinton Reynolds, Jr.
Name of Person

Firm/Company

1621 North 16th Avenue
Address

Pensacola, Florida 32503
City/State and Zip Code

rhubert89@yahoo.com
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Hubert Clinton Reynolds at (850) 456-0564
Name of Person — Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ $125.00 Filing Fee
☒ $130.00 Filing Fee & Certificate of Status
☐ $155.00 Filing Fee & Certified Copy (additional copy is enclosed)
☐ $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 Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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TALLAHASSEE, FLORIDA

ARTICLE I - Name:
The name of the Limited Liability Company is:

Hubert Clinton Reynolds, Jr. Funeral Home LLC
(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:**
1621 North 16th Avenue	1621 North 16th Avenue
Pensacola, Florida 32503	Pensacola, Florida 32503

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

Effective Date 07/01/09

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

Hubert Reynolds Clinton, Jr.
Name

1621 North 16th Avenue
Florida street address (P.O. Box **NOT** acceptable)

Pensacola 32503 FL
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 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..

x Hubert Clinton Reynolds, Jr
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager "MGRM" = Managing Member	**Name and Address:**
MGR	HUBERT REYNOLDS CLINTON, JR. 1621 North 16th Avenue Pensacola, Florida 32503
MGRM	EDNA REYNOLDS 1621 North 16th Avenue Pensacola, Florida 32503
MGRM	STACIE DENISE STALLWORTH 1621 North 16th Avenue Pensacola, Florida 32503

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 1 JULY 2009 . (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:

x Hubert Clinton Reynolds Jr

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.)

HUBERT CLINTON REYNOLDS, JR.
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)