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9/23/09

COVER LETTER

Division of Co			
SUBJECT:	CoLA Ho	rbus Home Liability Company	J L C C
The enclosed Articles o	f Organization and fee(s) are sub	omitted for filing.	09 SEP 23 SECRE TAR ALLAHASS
Please return all corresp	ondence concerning this matter	to the following:	23 ASS
·	Porter	Chadler ame of Person	PN 2: 27 Y OF STAT SEE, FLORII
	COW Horoc	M Homes a	11C >
	514 Fra	in Show	Pel
	Tollah City/St P5:ns/e To	Address Casel Code Tate and Zip Code The Code of th	, 323/2
For further information (E-mail address: (40 be used for a		
Potes Name o	Charle at	Area Code & Daytime Telep	15-549/ Ohone Number
Enclosed is a check fo	r 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 C Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

(Must end with the words "Limited Liability Company," "L.L.C.," or "L.L.C.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
514 Frank Show Pol 102 Chukkins DR Tallahosse, Fl. 32312 Thomos : Le, Ga 3 1792
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.)
The name and the Florida street address of the registered agent are:
514 Frank Shaw Pol SSR 23 Florida street address (P.O. Box NOT acceptable)
Tallalwstle FL 323/2 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
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

R" = Manager RM" = Managing Member	Name and Address:
	•
1(0/~/~(Proma Ch. Mb
	514 Frank Shaw Rd Tallahouse FL 32312
GRM	Singleton Holdings LLC
GRM	Thonowille, Ga 3179.
GRM	Dovid Dowdy
	Tallahaske K1. 32312
	/
attachment if necessary)	_
Effective date if other than the	e date of filing: (OPTION
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