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| Special Instructions to | Filing Officer:      |             |
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**EXAMINER** 

## **COVER LETTER**

| ٠ | TO:              | Registration<br>Division of C           |   |              |   |   |  |                    |                       |
|---|------------------|---|---|--------------|---|---|--|--------------------|-----------------------|
|   | SUBJE            | CT:                                     | Abundant  | Prope        | rty Res                                       | ources,   | LLC,   |                    |                       |
|   |                  | *************************************** | Name of Lin   | nited Liab   | ility Compa                                   | ny  |  |                    |                       |
|   | The enc          | losed Articles                          | of Organization and fee(s) ar   | e submitt    | ed for filing                                 | <b>3</b> ,  |  |                    |                       |
|   | Please re        | eturn all corres                        | spondence concerning this m   | atter to th  | e following                                   | :   |  |                    |                       |
|   | -                |   |   | Julie G      | 6. Miller                                     | <del></del>   |  |                    |                       |
|   |                  |   |   | Name o       | of Person                                     |   |  |                    |                       |
|   | _                |   | Abundant  | Propert      | y Resou                                       | rces, LLC   | ),   |                    |                       |
|   |                  |   |   | Firm/C       | ompany  |   |  |                    |                       |
|   | _                |   | 2007 P  | lantatio     | n Forest                                      | Drive   |  |                    |                       |
|   | _                |   |   | Add          | dress   |   |  |                    |                       |
|   |                  |   | Talla   | ahasse       | e, FL 323                                     | 317   |  |                    |                       |
|   | _                | <del> </del>                            |   |              | nd Zip Code                                   |   |  | ĀS                 | 97                    |
|   | _                |   | julier  | niller18     | @yahoo  | .com  |  | EC                 | <u> </u>              |
|   |                  |   | E-mail address: (to be used   | d for future | annual repo                                   | rt notification   | n)   |                    | 2                     |
|   | For furti        | ner information                         | n concerning this matter, plea  | ise call:    |   |   |  | SSE<br>YRY         | 2009 NOV 20 AM 10: 39 |
|   |                  | Juli                                    | e G. Miller   | at (         | 850 y   | •   | 443-9000   | E 05 5             | 至                     |
|   | -                |   | e of Person   | (            | Area Code                                     | & Daytime   | Telephone Number                                     |                    | <u>පූ</u>             |
|   | Enclose          | ed is a check                           | for the following amount:   |              |   |   |  | S.                 | 99                    |
| [ | <b>]\$12</b> 5.0 | O Filing Fee                            | \$130.00 Filing Fee & Certificate of Status   | — Ce         | 55.00 Filing<br>ertified Cop<br>ditional copy |   | \$160.00 F<br>Certificat<br>Certified<br>(additional | e of Stati<br>Copy | us &                  |
|   |                  |   | Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | š            | Registration of Clifton Boundary 2661 Exe     | urier Addro<br>on Section<br>of Corporati<br>uilding<br>cutive Cente<br>ce, FL 3230 | ions<br>er Circle                                    |                    |                       |

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

| The name of the Limited Liability Company   | is:  |   |
|---|--|---|
| Abundant Property (Must end with the words "Limited L   | / Resources, LLC, iability Company," "L.L.C.," or "LLC." | )   |
| ARTICLE II - Address: The mailing address and street address of the   | e principal office of the Limite                         | d Liability Company is:                   |
| Principal Office Address:   | Mailing Address:   |   |
| 2007 Plantation Forest Drive Tallahassee, FL 32317  | 2007 Plantation Forest<br>Tallahassee, FL 3231           |   |
| ARTICLE III - Registered Agent, Registe (The Limited Liability Company cannot serve as its own Re business entity with an active Florida registration.) | red Office, & Registered Age                             | ent's Signature:<br>individual or another |
| The name and the Florida street address of the  | ne registered agent are:                                 | 2009 NOV 20<br>SECRETARY                  |
|   | G. Miller  | AR TO                                     |
|   | ion Forest Drive   | CTT -                                     |
| Florida street address (I   | P.O. Box NOT acceptable)                                 | 三の三                                       |
| Tallahassee, FL 323   | <del> </del>   |   |
| City, Stat  | e, and Zip   | 10/A 39                                   |

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

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

| Title:   |  | Name and Address:  |
|--|--|--|
| "MGR" = Man  | ager   |  |
| "MGRM" = Ma  | anaging Member   |  |
| MGR  |  | Julie G. Miller  |
|  | <del></del>  | 2007 Plantation Forest Drive   |
|  |  | Tallahassee, FL 32317  |
| MGRM   |  | Eddie Svfrett, SR  |
|  |  | 2007 Plantation Forest Drive   |
|  |  | Tallahassee FL 32317   |
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| LE V: Effective<br>dective date is l<br>days after the     | e date, if other than the disted, the date must be date of filing.)  IGNATURE:   | r or an authorized representative of a member.  tion 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury ein are true.)   |
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| LE V: Effective<br>fective date is I<br>days after the     | e date, if other than the disted, the date must be date of filing.)  IGNATURE:  Signature of a member (In accordance with sect of this document constitutat the facts stated here      | r or an authorized representative of a member.  Alticutes an affirmation under the penalties of perjury ein are true.)  Lulio G. Miller  |
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