

Division of Corporations
L09000113275 Page 1 of 1

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000247376 3)))



H090002473763ABC5

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : LAW OFFICES OF JOSEPH M. LANDOLFI JR.
Account Number : I20080000084
Phone : (561)245-4144
Fax Number : (561)892-2345

FILED
09 NOV 24 PM 12:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA/FOREIGN LIMITED LIABILITY CO.
6776 NW 44, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

D. BRUCE
NOV 25 2009
EXAMINER

RECEIVED
09 NOV 24 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Fax Audit No. H090002473763

**ARTICLES OF ORGANIZATION
OF
6776 NW 44, LLC**

These Articles of Organization are made for the purpose of organizing a Florida Limited Liability Company under the Florida Limited Liability Company Act (Florida Statutes Chapter 608).

ARTICLE I - NAME

The name of this limited liability company ("Company") is: **6776 NW 44, LLC.**

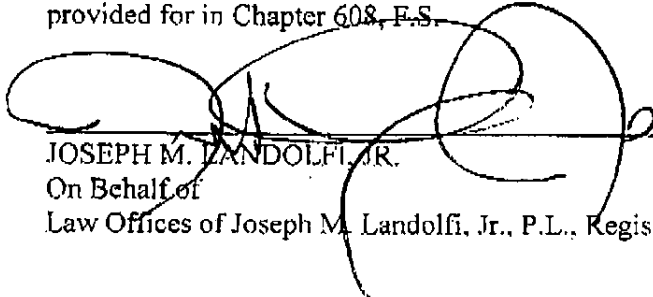
ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Company is:
102 Wood Stream Way, Williamston, SC 29697.

ARTICLE III - REGISTERED AGENT AND REGISTERED OFFICE

The name and the Florida street address of the registered agent is:
Law Offices of Joseph M. Landolfi, Jr., P.L.
7805 NW Beacon Square Blvd., Suite 102, Boca Raton, FL 33487.

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.



JOSEPH M. LANDOLFI, JR.
On Behalf of
Law Offices of Joseph M. Landolfi, Jr., P.L., Registered Agent

11-24-09
(Date)

FILED
09 NOV 24 PM 12:32
SECRETARY OF STATE
FALLAHASSEE, FLORIDA

Fax Audit No. H090002473763

Fax Audit No. 14090002473763

ARTICLE IV - MANAGER(S) or MANAGING MEMBER(S)

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

Title:

"MGR" - Manager

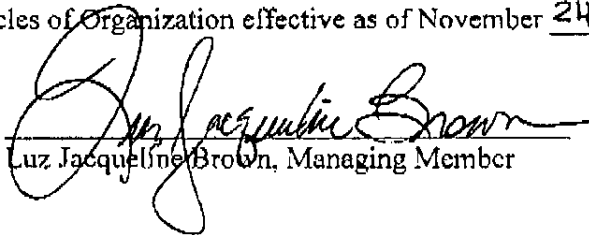
"MGRM" = Managing Member

Name and Address:

MGRM

Luz Jacqueline Brown
102 Wood Stream Way
Williamston, SC 29697

The undersigned executed these Articles of Organization effective as of November 24, 2009.


Luz Jacqueline Brown, Managing Member

FILED
09 NOV 24 PM 12:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Fax Audit No. 14090002473763