

L10000072436

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

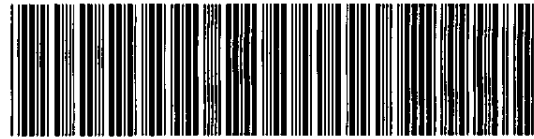
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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T. CLINE

JUL - 9 2010

EXAMINER

Harris Shelton Hanover Walsh, PLLC
ATTORNEYS AT LAW

Milton D. Hobbs, Jr.*

*Also licensed in Alabama

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38103

East Memphis Office
999 South Shady Grove Road
Suite 300
Memphis, Tennessee
38120

July 7, 2010

VIA FEDEX

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Baytowne Loft, LLC

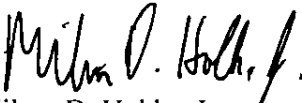
Dear Sir or Madam:

Enclosed for filing with your office are fully-executed Articles of Organization and Designation of Registered Agent for Baytowne Loft, LLC. Also enclosed is a check in the amount of \$155.00 from our firm for the required filing fee and for a certified copy of the Articles and Designation of Registered Agent.

Please file the Articles and Designation with your office and forward evidence of the filing and the certified copy to me in the enclosed self-addressed, pre-stamped envelope.

If you have any questions or concerns please contact me.

Sincerely,



Milton D. Hobbs, Jr.

MDH/amd
Enclosures

cc: Mr. Todd Wade (via regular mail with enclosures)
Robert Hosay, Esq. (via email with enclosures)

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TALLAHASSEE, FL

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Baytowne Loft, 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:705 Nottingham Drive
Oxford, MS 38655**Mailing Address:**705 Nottingham Drive
Oxford, MS 38655**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:

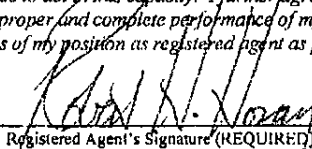
Robert H. Hosay

Name

106 East College Avenue ; Suite 900Florida street address (P.O. Box **NOT** acceptable)TallahasseeFL 32301

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

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TALLAHASSEE, FLORIDA

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

Todd Wade

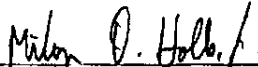
705 Nottingham Drive

Oxford, MS 38655

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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:

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.)

Milton D. Hobbs, Jr., authorized representative of Member

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)

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