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.

**Electronic Filing Cover Sheet** 

(((H100002368883)))



H100002388883ABC3

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 : ROGERS, TOWERS, BAILEY, ET AL

Account Number: 076666002273

Phone : (904) 398-3911

Fax Number : (904)396-0663

, BAILEY, ET AL ORDER

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

Email Address:

DOCT 29 AM 6: 32
CERETARY OF STATE

### FLORIDA LIMITED LIABILITY CO.

Harper Postremo, LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

T. CLINE

NOV - 1 2010

EXAMINEE

Electronic Filing Menu

Corporate Filing Menu

Help

# ARTICLES OF ORGANIZATION OF HARPER POSTREMO, LLC

These Articles of Organization are submitted for the purpose of forming a limited liability company pursuant to the Florida Limited Liability Company Act, Chapter 608, Florida Statutes, as the same may from time to time be amended (the "Act").

#### ARTICLE I - NAME

The name of this limited liability company (the "Company") is Harper Postremo, LLC.

#### **ARTICLE II - ADDRESS**

The address of the principal office and mailing address of the Company is 90 Wolfe St., Jacksonville, Florida 32205.

#### ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Company is 1301 Riverplace Blvd., Suite 1500, Jacksonville, Florida 32207, and the name of its initial registered agent at such address is Gayle Rice.

#### ARTICLE IV - MANAGEMENT OF THE COMPANY

The Company is to be managed by one or more managers and is, therefore, a manager-managed company.

#### ARTICLE V - LIMITED LIABILITY

Except as otherwise expressly provided by the Act, no member, manager, officer, agent or employee of the Company shall be personally liable for the debts, obligations or liabilities of the Company, whether arising in contract, tort or otherwise, or for the acts or omissions of any other member, manager, officer, agent or employee of the Company.

IN WITNESS WHEREOF, the undersigned, being an authorized representative of a Member of the Company, has executed these Articles of Organization this 29th day of October, 2010. 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.

Gayle Rice

Authorized Representative

## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 608.415 or 608.507, Florida Statutes, the below named limited liability company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the limited liability company is:

Harper Postremo, LLC

2. The name and address of the registered agent and office are:

Gayle Rice 1301 Riverplace Blvd., Ste. 1500 Jacksonville, Florida 32207

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICED 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. THE AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AMMANIE AR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

Dated: October 29, 2010

Signature of Registered Agent

Gayle Rice