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SECRETARY OF STATE
AND AHASSEE, FLORIDA

EXAMINER
DEC 1 0 2010

COVER LETTER

то:	Registration Section Division of Corporations	
SUBJ	ECT: Magnolia Fest, LLC	
		ited Liability Company
The er	nclosed Articles of Organization and fee(s) ar	e submitted for filing.
Please	return all correspondence concerning this ma	atter to the following:
	John B. Moss	
		Name of Person
	Head, Moss & Fulton, P./	۹.
		Firm/Company
	1530 Business Center Dri	ve, Suite 4
		Address
	Fleming Island, Florida 3200	3
		City/State and Zip Code
	jmoss@headmosfulton.com E-mail address: (to be used	for future annual report notification)
For fu	rther information concerning this matter, plea	use call:
Johr	n B. Moss	at (904) 278-8200
	Name of Person	Area Code & Daytime Telephone Number
Enclo	sed is a check for the following amount:	
5 \$125.0	0 Filing Fee \$\int \\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 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 Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	DТ	ICL	IF.	T_	Na	mas
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The name of the Limited Liability Company is:

Magnolia Fest, 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:

Mailing Address:

1836 Nightfall Drive

Neptune Beach, Florida 32266

1836 Nightfall Drive Neptune Beach, Florida 32266

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:

John B. Moss

Name

1530 Business Center Drive, Suite 4

Florida street address (P.O. Box NOT acceptable)

Fleming Island,

_{гт} 32003

City, State, and Zip

FILED
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SEVINE JARY OF STATE
JALLANASSEE, FLORIDA

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):

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

"MGRM" = Managing Member MGRM Judy Jenness 1836 Nightfall Drive Neptune Beach, Florida 32266 (Use attachment if necessary) CLE V: Effective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be more than five b 0 days after the date of filing.) REQUIRED SIGNATURE: REQUIRED SIGNATURE: (In accordance with section 608.408(3), Florida Statutes, the execution of this doconstitutes an affirmation under the penalties of perjury that the facts stated herei I am aware that any false information submitted in a document to the Department	
Signature of a member of an authorized representative of a member (In accordance with section 608.408(3), Florida Statutes, the execution of this doconstitutes an affirmation under the penalties of perjury that the facts stated herei	
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I am aware that any taise information submitted in a document to the Department	nt of State

Judy Jenness

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)