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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : DUNWODY WHITE & LANDON, P.A. / PALM BEACH
Account Number : I20020000176
Phone : (561) 655-2120
Fax Number : (561) 655-2168

Effective Date 03/03/11

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

Email Address: DCAPES@DWL-LAW.COM

FLORIDA LIMITED LIABILITY CO.
Stephen Mosling Properties LLC

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

RECEIVED

11 MAR -3 PM 2:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

11 MAR -3 AM 7:56

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J. BRYAN

MAR -4 2011

EXAMINER

3/3/2011

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Stephen Mosling Properties 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:

Dorchester Unit 1202, 6075 Pelican Bay Blvd., Naples, FL 34108

Mailing Address:

Dorchester Unit 1202, 6075 Pelican Bay Blvd., Naples, FL 34108

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:

Effective Date 03/03/11

Daniel K. Capes

Name

4001 Tamiami Trail N., Suite 200

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

Naples

FL 34103

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)

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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

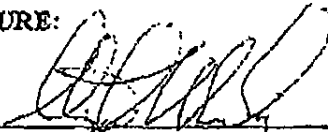
Name and Address:MGR

Stephen P. Mosling, Trustee of the
 Stephen P. Mosling Seventh A/R Rev. Trust u/d/d 3/10/10
 Dorchester Unit 1202, 6075 Pelican Bay Blvd., Naples, FL 34109

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 TALLAHASSEE, FLORIDA

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 3/3/2011 (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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Stephen P. Mosling, as Trustee of the Stephen P. Mosling Seventh A/R Rev. Trust u/d/d 3/10/10

Typed or printed name of signer

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)