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.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone

: (850)222-1092

Fax Number : (850)878-5368

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

Pmsil	Address:	
LHELL	ACCITORS:	

FLORIDA LIMITED LIABILITY CO. Henry Family Florida Lots, LLC

C ic i coi i	
Certificate of Status	
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

J. SAULSBERRY EXAMINER

COVER LETTER

TO	Registration Division of C			
SUBJ	ECT	Henry Fa	imily Florida Lots, LLC	
			ted Liability Company	
The or	nclosed Articles	of Organization and foe(s) are	submitted for filing.	
Pleaso	return all corres	spondence concerning this mai	tor to the following:	TALLAND TALLAND
•		Suzann	e M. Irwin, Paralegai	58 8 TI
		181	Name of Person	
			•	SSA -
		Flast	er/Greenberg P.C.	
			Pirm/Company	
			•••	8: 08
		1810 Chapel Ave	nue West, Commerce Center	
			Address	⊅ ** 6 0
		Cherry Hill	New Jersey 08002	
			ly/State and Zip Code	
		suzenne inv	in@flastergreenberg.com	
		E-wail address: (to be used	for future annual report notification)	· · · · ·
For fix	rth er information	concerning this matter, pleas	é oail:	-
	Suzanne N	4. irwin, Paralegal	at (856) 382-2251	•
		of Person	Area Code & Daysime Telephone Numbe	
		for the following amount:	\$155.00 Filing Fee &\$160.00 F	
		Certificate of Status	(additional copy is enclosed) Certified	s of Status & Copy Copy sopy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tellahassoc, 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

ARTICLE I - Name: The name of the Limited Liability Compar	ny is:
Henry Family I	Florida Lots, LLC
•	
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited Liability Company is:
Princinal Office Address:	Malling Address:
21391 Widgeon Terrana	729 Mill Street SSR
Fort Myers Beach, FL 33931	Moorestown, NJ 08057
(The Umited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of	stered Office, & Registered Agent's Signature of Registered Agent. You must designate an individual or another in the registered agent are:
	Name
1200 South	Pine Island Road
Florida street address	(P.O. Box NOT acceptable)
Plantation, 333	324 _{== 171.}
Plantation, 333 City, 9	itate, and Zip
liability company at the place designate registered agent and agree to act in this va statutes relating to the proper and comple accept the obligations of my position as	and to accept service of process for the above stated limited and in this certificate, I hereby accept the appointment as a spacity. I further agree to comply with the provisions of all ete performance of my duties, and I am familiar with and a registered agent as provided for in Chapter 608, F.S Sharon R. Kresz Assistant Secretary

(CONTINUED)

Page 1 of 2

"MGR" = Manager "MGRM" = Managing Member MGRM MGRM	William S. Henry 21391 Widgeon Terrace Fort Myers Beach, Florida 33931 Christine E. Henry 21391 Widgeon Terrace
MGRM	21391 Widgeon Terrace Fort Myers Beach, Florida 33931 Christine E. Henry
	21391 Widgeon Terrace Fort Myers Beach, Florida 33931 Christine E. Henry
	21391 Widgeon Terrace Fort Myers Beach, Florida 33931 Christine E. Henry
MGRM	Fort Myers Beach, Florida 33931 Christine E. Henry
MGRM	Chriatine E. Henry
MGRM	
	21391 Widgeon Terrace
	Fort Myers Beach, Florida 33931
(Use attachment if necessary)	William Co.
CLE V: Effective date, if other than the	e date of filing: (OPTION
	be specific and cannot be more than five business de
0 days after the date of filing.)	
DEATHDEN STANKTION.	
<u>REOUIRED</u> SIGNATURE:	
RECORED SIGNATURE:	5 · C · / ·
Chr	Atrac C. Heary
Signature of a mamb	edical C. Heady- per or an authorized representative of a member.
Signature of a mamb	ection 608.408(3), Florida Statutes, the execution
Signature of a mamb	ection 608.408(3), Florida Statutes, the execution satisfacts an affirmation under the penalties of perjury
Signature of a mamb	ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury erein are true.)
Signature of a mamb (In accordance with a of this document con that the facts stated he	ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury crein are true.) Christine E. Henry
Signature of a mamb	ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury erein are true.)