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(Requestor's Name)				
(Address)				
. (Ad	ldress)			
(Cit	ty/State/Zip/Phone	· #)		
PICK-UP	WAIT'	MAIL		
(Bu	isiness Entity Nam	ne)		
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				
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EXAMINER



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FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

ZO 12**-19**-2011

NAME:

LANDOLOGY HARTWELL FINANCE LLC

TYPE OF FILING: ARTICLES OF ORGANIZATION

COST:

\$160

RETURN: CERTIFICATE OF STATUS & CERTIFIED COPY

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

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COVER LETTER

TO: Registration Section Division of Corporations	,		. *	
_{SUBJECT:} Landology Ha	rtwell Finance, L	LC .		
	Name of Limited Liability C			
The enclosed Articles of Organization	and fee(s) are submitted for	filing.		
Please return all correspondence conc	erning this matter to the follo	wing:		
Donald E. Johns	on, Esq.			
,	Name of Perso	n		
Sirote & Permutt,	P.C.			
	Firm/Compan	у	,	
2311 Highland Ave S, Suite 500				
	Address			
Birmingham, Alabar				
	City/State and Zip	Code		
djohnson@sirote.con	l ess: (to be used for future annua	report notification		
For further information concerning th	•	,		
Donald E. Johnson, Esq.	at (205	930-5267	,	
Name of Person	Area	Code & Daytime Tel	ephone Number	
Enclosed is a check for the follow	ng amount:			
\$125.00 Filing Fee \$130.00 F Certificat	e of Status Certified		\$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/Courler 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 Company is:

business entity with an active Florida registration.)

Landology Hartwell Finance, 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: 135 Second Avenue North Jacksonville Beach, Florida 32250 Mailing Address: 135 Second Avenue North Jacksonville Beach, Florida 32250

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

The name and the Florida street address of the registered agent are;

Landology, LLC

135 Second Avenue North

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

Jacksonville Beach FI 32250

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..

legistered Agenta 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: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM Landology Hartwell, LLC 135 Second Avenue North, Suite 3 Jacksonville Beach, Florida 32250 (Use attachment if necessary) . (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: _ (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.) William G. Slagle, Manager of Sole 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)