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VERO PROPERTY INVESTMENT II, LLC

TYPE OF FILING: ARTICLES OF ORGANIZATION

COST:

\$125

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COVER LETTER

	tion Section of Corporations	*	
SUBJECT:	UBJECT: Vero Property Investment II, LLC		
	Name of Lim	ited Liability Company	
The enclosed Artic	cles of Organization and fee(s) are	submitted for filing.	
Please return all co	prrespondence concerning this ma	tter to the following:	
	Mr. Jo	hn C. Mooney	
		Name of Person	
******************************	Mr. John C. Moor	ney, Attorney at Law	
		Pirm/Company	
	2149 Vade	en Village Dr.	
		Address	
	Chattanoog	e, TN 37421	
		ty/State and Zip Code	
		ORNEY@AOL.COM	
	E-mail address: (to be used	for future annual report notification)	
For further informa	tion concerning this matter, pleas	e call:	
Mr. John C. Mooney		_at (423)892-7263	
N	ame of Person	Area Code & Daytime Telephone Number	
Enclosed is a chec	ck for the following amount:		
\$125.00 Filing F	ee \$130.00 Filing Fee & Certificate of Status	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, PL 32301	

ARTICLES OF ORGANIZATION FOR FL	ORIDA LIMITED LIABILITY COMPAN	
ARTICLE I - Name: The name of the Limited Liability Company is:	花·斯	
Vero Property Investment II, LLC		
(Must end with the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the prin	ncipal office of the Limited Liability Company	
Principal Office Address:	Mailing Address:	
870 - 900 21st Street	7201 Shallowford Road	
Vero Beach, Florida 32960	Suite 200	
	Chattanooga, Tennessee 37421	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the registration.	red Agent. You must designate an individual or another	
NRAI Services, Inc.		
Name		
515 East Park Avenue		
Florida street address (P.O. Box NOT acceptable)		
Tallahassee	FL 32301	
City, State		
registered agent and agree to act in this capacity.	is certificate, I hereby accept the appointment as	

edall 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..

NRAI Services, Inc.

Registered Agent's Signature (REQUIRED)

Gwendolyn Andrews, Special Asst. Secretary (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: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM Byron DeFoor 7201 Shallowford Road; Suite 200 Chattenooga, Tennessee 37421 MGRM Barry Ray 7201 Shallowford Road; Suite 200 Challanooga, Tennessee 37421 (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

REQUIRED SIGNATURE:

to or 90 days after the date of filing.)

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.)

John C. Mooney

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)