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SECRETARY OF STATE

COVER LETTER

Division of	Corporations			
SUBJECT: Don	Stuart Homes, L.	L.C.		
		ited Liability Co	ompany	
The enclosed Articles	of Organization and fee(s) are	submitted for f	īling.	
Please return all corre	spondence concerning this ma	tter to the follow	ving:	
Don Stu	ıart			
, ,		Name of Person	1	
,,		Firm/Company		
P.O. Box	v 307	- · · · · · · · · · · · · · · · · · · ·		
F.O. BO.	X 307	Address	· · · · · · · · · · · · · · · · · · ·	
Parrish, F	1 2/210			
i amsn, i		ty/State and Zip (Code	
donstuarth	nomes@verizon.net			
	E-mail address: (to be used	for future annual	report notification	n)
For further information	n concerning this matter, pleas	e call:		
Don Stuart		_ _{at (} 941	776-531	
Nam	e of Person	Area (Code & Daytime T	Celephone Number
Enclosed is a check	for the following amount:			
	\$130.00 Filing Fee & Certificate of Status	Certified	iling Fee & Copy 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	Regist Divisi Clifto 2661	Courier Address ration Section ion of Corporati n Building Executive Center lassee. FL 3230	ons T Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
Don Stuart Homes, L.L.C.		
(Must end with the words "Limited Liability	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 Comp	pany is:
Principal Office Address:	Mailing Address:	
5703 Spencer Parrish Rd.	P.O. Box 307	
Parrish, FL 34219	Parrish, FL 34219	
ARTICLE III - Registered Agent, Registered ((The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's Signature: red Agent. You must designate an individual or another.	125
The name and the Florida street address of the reg		FIL 3.
Donald J. Stuart	m-4	##T
Name	n in the second	E D
5703 Spencer Parrish Rd		ANTO: 00
Florida street addre	ess (P.O. Box NOT acceptable)	8
Parrish	_{FL} 34219	
City, State	e, 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)

ARTICLE IV- Manager(s) or Managing Member(s):

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

$"MGR" \equiv Manager$		
"MGR" = Manager "MGRM" = Managing Member		
MGR	Donald J Stuart	
	5703 Spencer Parrish Rd.	
	Parrish, FL 34219	
(Use attachment if necessary)		
(Use attachment if necessary)		
,	ne date of filing:	AL)
CLE V: Effective date, if other than the	ne date of filing: (OPTION be specific and cannot be more than five business da	•
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CLE V: Effective date, if other than the effective date is listed, the date must		•
CLE V: Effective date, if other than the effective date is listed, the date must 0 days after the date of filing.)		•
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CLE V: Effective date, if other than the effective date is listed, the date must 0 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of	ber or an authorized representative of a member. 08.408(3), Florida Statutes, the execution of this document.	12 FEB 20
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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)