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For the Department of
Division of Corporations
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To:

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

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
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AVALON VACATION HOME, LLC**

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**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - NAME OF LIMITED LIABILITY COMPANY

THE NAME OF THE LIMITED LIABILITY COMPANY IS:

AVALON VACATION HOME, LLC

**ARTICLE II - STREET ADDRESS AND MAILING ADDRESS
OF LIMITED LIABILITY COMPANY**

THE PRINCIPAL PLACE OF BUSINESS AND THE MAILING ADDRESS OF THE
LIMITED LIABILITY COMPANY IS:

14186 EASTMOUNT ROAD
SPRING HILL, FLORIDA 34609

ARTICLE III - REGISTERED AGENT AND OFFICE

THE NAME OF THE REGISTERED AGENT AND THE STREET ADDRESS OF
THE REGISTERED OFFICE OF THE LIMITED LIABILITY COMPANY IS:

CHERYL M. O'BRIEN-BURNETT
14186 EASTMOUNT ROAD
SPRING HILL, FLORIDA 34609

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, FLORIDA STATUTES.

DATED: 6/25/12


CHERYL M. O'BRIEN-BURNETT

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ARTICLE IV - MANAGEMENT

THE NAME AND ADDRESS OF EACH MANAGER OR MANAGING MEMBER IS AS FOLLOWS:

MANAGER/MEMBER: CHERYL M. O'BRIEN-BURNETT
14186 EASTMOUNT ROAD, SPRING HILL, FLORIDA 34609

MANAGER/MEMBER: JOHN A. H. BURNETT
14186 EASTMOUNT ROAD, SPRING HILL, FLORIDA 34609

DATED: 6/25/12

x 

CHERYL M. O'BRIEN-BURNETT

IN ACCORDANCE WITH SECTION 608.408(3), FLORIDA STATUTES, THE EXECUTION OF THIS DOCUMENT CONSTITUTES AN AFFIRMATION UNDER PENALTIES OF PERJURY THAT THE FACTS STATED HEREIN ARE TRUE.

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