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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: DARLING & COMPANY APPRAISALS, LLC
Name of Limited Liability Competty
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
SUSAN WALKER DARLING
Name of Person
DARLING & COMPANY APPRAISALS, LLC
Firm/Company
1290 MAGNOLIA TRAIL
Address
GRAND RIDGE, FL 32442
City/State and Zip Code
sdarling@embarqmail:com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
SUSAN WALKER DARLING 850 718-8752
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
125.00 Filing Fee \$\ \times \text{S130.00 Filing Fee} & Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327

Tallahassoe, FL 32314

Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Effective Date 8/1/12

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

DARLING & COMPANY APPRAISALS, LLC

(Must end with the words "Limited Liability Company, "L.I.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:

1290 MAGNOLIA TRAIL

GRAND RIDGE, FL 32442

1290 MAGNOLIA TRAIL GRAND RIDGE, FL 32442

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 business entity with an active Florida registration.)

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

SUSAN WALKER DARLING

Name

1290 MAGNOLIA TRAIL

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

GRAND RIDGE

FL 32442

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.\(^1\) 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.

(CONTINUED)

degistered Agent's Signature (REQUIREI

Page 1 of 2

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ARTICLE	IV-	Manageri	s) or	Managing	Member(s):
WW 1 1 0		************	.,	*.va	

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

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGR	SUSAN WALKER DARLING 1290 MAGNOLIA TRAIL	
	GRAND RIDGE, FL 92442	
(Use attachment if necessary)		
	00/04/0040	

ARTICLE V: Effective date, if other than the date of filing: 08/01/2012 _. (OPTIONAL) (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.)

REOUIRED SIGNATURE:

Signature of a member or an authorized representatiy or 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.)

SUSAN WALKER DARLING

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)

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