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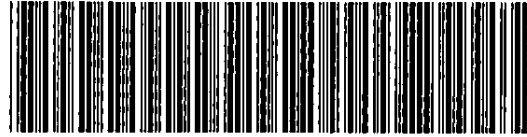
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B. BOSTICK
OCT 17 2012
EXAMINER



DONAHOO & MCMENAMY, P.A.
245 RIVERSIDE AVENUE, SUITE 450
JACKSONVILLE, FL 32202
T: (904) 354-8080 F: (904) 791-9563
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October 12, 2012

VIA FEDERAL EXPRESS

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**Re: Emily Lane W, LLC
Our File Reference: 10833.002**

Dear Madam or Sir:

I am sending the following for your further handling with regard to the above referenced LLC.

1. Articles of Organization for Emily Lane W, LLC
2. Check in the amount of \$125.00.

Thank you for your assistance with this matter and if you should have any questions, please feel free to give me a call.

Sincerely,

A handwritten signature in black ink that reads "Emily K. Dillow".

Emily K. Dillow

EKD/tbw
Enclosures

THOMAS M. DONAHOO
WILLIAM B. MCMENAMY
THOMAS M. DONAHOO, JR.
EMILY K. DILLOW
JOHN W. DONAHOO
(1907-1993)

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ARTICLES OF ORGANIZATION

FOR

EMILY LANE W, LLC

The undersigned authorized representative hereby executes these Articles of Organization for the purpose of forming a limited liability company under the laws of the State of Florida.

ARTICLE 1. NAME

The name of this limited liability company is EMILY LANE W, LLC.

ARTICLE 2. ADDRESSES

The mailing address and the street address of the principal office of the limited liability company is 6205 Spring Forest Circle, Jacksonville, Florida 32216.

ARTICLE 3 - REGISTERED AGENT,

REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

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

Emily K. Dillow
Donahoo & McMenamy, P.A.
245 Riverside Avenue, Suite 450
Jacksonville, Florida 32202

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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



Registered Agent's Signature

ARTICLE 4. DURATION

This limited liability company is to exist perpetually.

ARTICLE 5. PURPOSE

This limited liability company is organized for the purpose of transacting any and all lawful business for which limited liability companies may be organized under the Florida Limited Liability Company Act, Chapter 608, Florida Statutes, as amended.

ARTICLE 6. MEMBERS

The members of this limited liability company are:

<u>NAME</u>	<u>ADDRESS</u>
Earl William Frick, Jr. and Darby Lynn Frick, Co-Trustees of The Frick Family Trust	6205 Spring Forest Circle Jacksonville, FL 32216

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ARTICLE 7. MANAGEMENT

This limited liability company is to be managed by the members and the names and addresses of the managing members are:

<u>NAME</u>	<u>ADDRESS</u>
Earl William Frick, Jr. and Darby Lynn Frick, Co-Trustees of The Frick Family Trust	6205 Spring Forest Circle Jacksonville, FL 32216

ARTICLE 8. ADMISSION OF ADDITIONAL MEMBERS

No person may be admitted as an additional member of this limited liability company unless all current members consent in writing to the admission of the additional member.

IN WITNESS WHEREOF, I, the undersigned authorized representative, have hereunto set my hand and seal this 10th day of October, 2012, for the purpose of forming this limited liability company under the laws of the State of Florida, and I hereby make and file in the office of the Secretary of the State of Florida, these Articles of Organization and certify that the facts herein stated are true.

Emily K Dillow
EMILY K. DILLOW, Authorized
Representative

STATE OF FLORIDA
COUNTY OF DUVAL

~~SUBSCRIBED~~, SWORN AND ACKNOWLEDGED to me by EMILY K. DILLOW, who is () personally known to me or () has produced _____ as identification, this 10th day October, 2012.



Teresa B. West
Notary Public, State of
Florida at Large

(Teresa B. West)

Print name below signature

My Commission Expires:

My Commission Number:

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