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LILEBIARY OF STATE
AHASSEE, FLORIDA

COVER LETTER

TO:	Registration S Division of Co			
SUBJI	ECT:Anc	hors Street Partner		
		Name of Limit	ed Liability Company	
The en	closed Articles o	of Organization and fee(s) are	submitted for filing.	
Please	return all corres	pondence concerning this matt	er to the following:	
	William	D. Jenkins		
			Name of Person	
	Anchors	Street Partners LL	С	
			Firm/Company	
	627 Anc	hors Street		
			Address	
	E-ut II.	1 D	205/0	
	Fort Wa	lton Beach, Florida Cit	32548 y/State and Zip Code	
	. 1 .		•	
-	wjenkin	E-mail address: (to be used t	om for future annual report notification)	
For fur	ther information	concerning this matter, please	call:	
Wi	lliam D. J	enkins	at (850) 243-6111	
		of Person	Area Code & Daytime Teleph	one Number
Enclos	ed is a check f	or the following amount:		
3 1\$125.	00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & □ 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 Cir Tallahassee, FL 32301	rcle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
• • •	
Anchors Street Partners LLC	
(Must end with the words "Limited Liability	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the pri	ncipal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
Anchors Street Partners LLC	Anchors Street Partners LLC
627 Anchors Street	627 Anchors Street
Fort Walton Beach, Florida 32548	Fort Walton Beach, Florida 32548
ARTICLE III - Registered Agent, Registered	
(The Limited Liability Company cannot serve as its own Registe	red Agent. You must designate an individual or another
business entity with an active Florida registration.)	[
The name and the Florida street address of the re	egistered agent are:
	egistered agent are:
William D. Jenkins	
Name	SEX 2

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..

City, State, and Zip

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

32548

Registered Agent's Signature REQUIRED

627 Anchors Street

Fort Walton Beach

(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:

MGRM		William D. Jenkins
		627 Anchors Street
		Fort Walton Beach, Florida 32548
MGR	_	Lyn M. Jenkins
		627 Anchors Street Fort Walton Beach, Florida 32548
· · · · · · · · · · · · · · · · · · ·	_	
(Use attachment it	• ,	ne date of filing: (OPTIONA
ffective date is lis		st be specific and cannot be more than five busine

(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.)

William D. Jenkins
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)