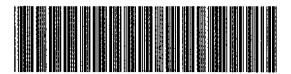
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(Address)	_
(Address)	_
(City/State/Zip/Phone #)	_
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SECRETARY OF STATE
TALLAHASSEE, FLORIO

EFFECTIVE DATE 2 25 2013

COVER LETTER

TO: Registration Section
Division of Corporations

Peace properties LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Raj Desai

Name of Person

Firm/Company

10012 RandallsTown Lane

Address

Jacksonville, Florida 32256

City/State and Zip Code

EFFECTIVE DATE 2 25 2013

peacehospitality@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Raj Desai

.,904

396-5738

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■\$125.00 Filing Fee

□\$130.00 Filing Fee & Certificate of Status

□\$155.00 Filing Fee &

□ \$160.00 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
Tallahassee, FL 32314

Street/Courier Address

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

(850) 245-6051

COVER LETTER

TO:

Registration Section Division of Corporations

Peace properties LLC

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Division of Corporations	ETTECTIVE DATE
Peace properties LLC	•
Name of Limited Liability Company	TO ME
enclosed Articles of Organization and fee(s) are submitted for filing.	A THE STATE OF THE
ase return all correspondence concerning this matter to the following:	
Raj Desai	
Name of Person	
Firm/Company	
3754 ST. AUGUSTINE-ROAD -	
Address	
Jacksonville, Florida 32207	
City/State and Zip Code	
peacehospitality@yahoo.com	
E-mail address: (to be used for future annual report notifical	tion)

For further information concerning this matter, please call:

Area Code & Daytime Telephone Number Name of Person

Enclosed is a check for the following amount:

■\$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 Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	,
Peace Properties I LLC	EFFECTIVE DATE 225 2013
(Must end with the words "Limited Liabil	ity Company, "L.L.C." or "LLC")
(mast one with the words Diffilled Diagon	y company, maior, c. maior,
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3754 St Augustine Road,	3754 St Augustine Road,
Jacksonville, Florida 32207	Jacksonville, Florida 32207
	ALCOHOL MANAGEMENT OF THE PROPERTY OF THE PROP
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registations) business entity with an active Florida registration.)	
The name and the Florida street address of the re	egistered agent are:
Del Danni	s de la companya del companya de la companya del companya de la co
Raj Desai Name	The way
Haile	A A A A A A A A A A A A A A A A A A A
3754 St. Augustine Roa	ad Salam
Florida street add	ress (P.O. Box NOT acceptable)
Jacksonville	PI 32207
	ite, and Zip
•	RIII
0 0	accept service of process for the above stated limited
	his certificate, I hereby accept the appointment as
	ity. I further agree to comply with the provisions of eperformance of my duties, and I am familiar with
	gistered agent as provided for in Chapter 608, F.S
and accept the outgations of my position as ref	gisierea ageni as proviaca jor in Chapier 000, F.S
a	
The The	
Donistanad Acaut's Signatur	(PEOLIPEO)

(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:

'MGR" = Manage 'MGRM" = Mana	
MGR	Raj Desai
7,0,1	3754 St. Augustine Road
	Jacksonville, Florida 32207
MGRM	Sangita Desai
	3754 St. Augustine Road
	Jacksonville, Florida : 32207
marky - 17 - 18 - 18 - 18 - 18 - 18 - 18 - 18	
	•
LE V: Effective d fective date is lis or 90 days after t	te, if other than the date of filing: February 25, 2013 (OPTION red, the date must be specific and cannot be more than five busine date of filing.)
LE V: Effective d fective date is lis or 90 days after t	te, if other than the date of filing: February 25, 2013 (OPTION red, the date must be specific and cannot be more than five busine date of filing.)
LE V: Effective d fective date is lis or 90 days after t	te, if other than the date of filing: February 25, 2013 . (OPTION red, the date must be specific and cannot be more than five busine date of filing.) NATURE:
E V: Effective d fective date is lis or 90 days after t	te, if other than the date of filing: February 25, 2013 (OPTION red, the date must be specific and cannot be more than five busine date of filing.)
LE V: Effective defective date is lister to the second sec	te, if other than the date of filing: February 25, 2013 . (OPTION red, the date must be specific and cannot be more than five busine date of filing.) NATURE:
fective date is list or 90 days after the second se	te, if other than the date of filing: February 25, 2013 (OPTION red, the date must be specific and cannot be more than five busine date of filing.) NATURE: Signature of a member or an authorized representative of a member. Idence with section 608.408(3), Florida Statutes, the execution of this document is an affirmation under the penalties of perjury that the facts stated herein are true. The tere that any false information submitted in a document to the Department of State

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)