L1300005753H

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(any, amount notion)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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(850) 245-6051.

COVER LETTER

TO: Registration S Division of Co		
	Cola Proporti	and Land LL
SUBJECT:	Name of Limit	is 4 Land, LLC ed Liability Company
The enclosed Articles o	f Organization and fee(s) are	submitted for filing.
Please return all corresp	ondence concerning this matt	er to the following:
	Daniel	Cole Name of Person
		Name of Person
		Firm/Company
	60 Branc	Le Ave
		Address
	Danta Resa	Address Buch, Fr. 32459 y/State and Zip Code bell 50uth rut for future annual report notification)
	Cit	y/State and Zip Code
	E-mail address: (to be used	beU5outh.xet or future annual report notification)
For further information	concerning this matter, please	call:
DANIEL (7./.	22 24 24 6
Name	of Person	at (<u>850</u>) <u>267-3965</u> Area Code & Daytime Telephone Number
		,
Enclosed is a check f	or the following amount:	
\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	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:

Cole Properties	V + Land, LLC
(Must end with the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
60 Brande Ave	Same
Jarta Rosa Beach, Fr 32459	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the re	gistered agent are:
Manuel C Name	ale
Name	
60 Drande A	ress (P.O. Box NOT acceptable)
Florida street addr	ress (P.O. Box <u>NOT</u> acceptable)
City State	4°C, 14 3245 7 te, and Zip
Having been named as registered agent and to a liability company at the place designated in th registered agent and agree to act in this capacit all statutes relating to the proper and complete	ccept service of process for the above stated limited also certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of a performance of my duties, and I am familiar with existered agent as provided for in Chapter 608, F.S.

Page 1 of 2

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

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

<u>Title:</u> "MGR" = Manager	Name and Address:	•
"MGRM" = Managing Member	•	
		
		· · · · · · · · · · · · · · · · · · ·
	annual	
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(Use attachment if necessary)	·	
(Use attachment if necessary)		
CLE V: Effective date, if other that	an the date of filing:	(OPTION
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