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(Requestor's Name)				
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C. LEW!S

MAY 2 2 2013

EXAMINER

... Corporate Direct, Inc.

2248 Meridian Boulevard, Suite H Minden, Nevada 89423

775-782-2201 - Main 775-782-2611 - FAX 775-284-7167 - Lisa Direct

May 06, 2013

Secretary Of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re:

Sandridge Morning Court, LLC

Dear Clerk:

Enclosed please find two original copies of the Articles of Organization for the above-captioned entity. Also enclosed is a check for the filing fees. Once filed, please return the file-stamped copy to me at your earliest opportunity.

Thank you for your continued courtesy. Please do not hesitate to call me if you have any questions.

Best Regards,

Lisa Shults

Enclosures

COVER LETTER

TO:	Registration S Division of Co			
SURII	ECT: Sand	dridge Mornin	g Court, LLC	
эо ва			ed Liability Company	· · · · · · · · · · · · · · · · · · ·
The er	nclosed Articles o	of Organization and fee(s) are	submitted for filing.	
Please	return all corresp	oondence concerning this matt	er to the following:	
	Lisa Sh	nults		
			Name of Person	
	Corpora	ate Direct, Inc	•	
			Firm/Company	
	2248 M	leridian Blvd.,	Ste. H	
			Address	
	Minden	, NV 89423		
	lehulte@c	corporatedirect.cor	y/State and Zip Code	
	isriaits@c	•	or future annual report notification)	
For fu	rther information	concerning this matter, please	call:	
Lis	a Shults	5	at (775 <u>284-71</u> Area Code & Daytime Teleph	67
	Name	of Person	Area Code & Daytime Teleph	one Number
Enclo	sed is a check fo	or the following amount:		
1 \$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 Cir.	cle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Sandridge Morning (_	
(Must end with the words "Limited Liabi	lity Company, 'L.L.C.," or "LLC.")		
ARTICLE II - A The mailing addr		rincipal office of the Limited Liability	Compa	ny is:
Principal Office	Address:	Mailing Address:		
60 East Simpson Ave	e., #2869, Jackson, WY 83001	60 East Simpson Ave., #2869, Jackson, WY 8300	<u>1</u>	
			- -	
(The Limited Liability business entity with a		d Office, & Registered Agent's Signal stered Agent. You must designate an individual or a registered agent are:	nother	
	Name		MAY	<u>T</u>
	1037 Greystone Lane		21	LEI
	Florida street add	dress (P.O. Box NOT acceptable)		Û
	Sarasota	FL 34232 ate, and Zip). 58).	
		mo, min tip		imitea

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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:

<u>Title:</u> "MGR" = Manager	Name and Address:	FILED 13 MAY 21 AN 10: TALLABATION AT 1
"MGRM" = Managing Member		MAY 21 AN 10: TALLAHASSEE, FLORID WY 83001
MGR	FL Real Estate 1234, LLC	THELAMASSEE, FI GOT
	60 East Simpson #2869, Jackson,	WY 83001
		
(Use attachment if necessary)		
•		
ICLE V: Effective date, if other than the		
n effective date is listed, the date mus r to or 90 days after the date of filing.)	t be specific and cannot be mo	re man five business days
,		
DECHIDED SIGNATURE.		
REQUIRED SIGNATURE:		
() - (1 110	
Desca	er or an authorized representative of	

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjurythat 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.)

Lisa Shults, Organizer

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)