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SECRETARY OF STATE

TALLAHASSEF EL CORP.

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**TO:** Registration Section

Division of Corporations

SUBJECT: Mobay Flower, LLC

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Seton T. Hengesbach, Esq.
HENGESBACH & HENGESBACH, P.A.
5438 Spring Hill Drive
Spring Hill, Florida 34606
E-mail address (to be used for future annual report notification): info@naturecoastlaw.com

For further information concerning this matter, please call:

Seton T. Hengesbach, Esq. at (352) 683-1963

Enclosed is a check for the following amount: \$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 OF MOBAY FLOWER, LLC.

ARTICLE I - NAME

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The name of the limited liability company is Mobay Flower, LLC, ("company")

#### ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address: 3047 Stephanie Drive Spring Hill, Florida 34608 Mailing Address: 3047 Stephanie Drive Spring Hill, Florida 34608

### ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

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

Lizan Alleyne-Battick 3047 Stephanie Drive Spring Hill, Florida 34608

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..

Kna Gleyne - Battick Lizan Alleyne-Battick

#### ARTICLE IV - MANAGERS OR MANAGING MEMBERS

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

Title:

Name and Address:

"MGR" = Manager

"MGMR" = Managing Member

**MGMR** 

Lizan Alleyne-Battick 3047 Stephanie Drive Spring Hill, Florida 34608 FILED

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SECKETARY OF STATE
AND ANASSEE, FLORIDA

#### **REQUIRED SIGNATURE:**

Angu Wlayne - Battick
Signature of a member or an authorized representative of a member.

(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.)

Lizan Alleyne-Battick

Typed or printed name of signee

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY Mobay Flower, LLC, SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA:

- 1. The name of the Limited Liability Company is Mobay Flower, E 23
- 2. The name and the Florida street address of the registered agent and office are:

  Lizan Alleyne-Battick
  3047 Stephanie Drive
  Spring Hill, Florida 34608 (Post office box is NOT acceptable.)

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.

Lizan Afleyne-Battick

Registered Agent