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### **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT: South Walton Home Management 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:

Amy L. Haney Name of Person South Walton Home Management LLC Firm/Company 248 Windchime Way Address Freeport, Fl. 32439 City/State and Zip Code southwaltonhomemgmt@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Amy L Hanev Area Code & Daytime Telephone Number 146 Enclosed is a check for the following amount: □ \$160.00 Filing Fee, □\$155.00 Filing Fee & **□**\$125.00 Filing Fee ■\$130.00 Filing Fee & Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (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 - N The name of the	ame: Limited Liability Company is:				
South Walton Home	Management LLC.				
	Must end with the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")			
ARTICLE II -	Address:				
	ress and street address of the pr	incipal office of the Limited L	iability Co	ompa	ny is:
Principal Office Address:		Mailing Address:			
1 Time par Childe Tida 1 Sage					
248 Windchime Way		248 Windchime Way			
Freeport, Fl. 32439	· · · · · · · · · · · · · · · · · · ·	Freeport, Fl. 32439			
ARTICLE III -	Registered Agent, Registered	Office, & Registered Agent	's Signatu	ıre:	
	Company cannot serve as its own Regist an active Florida registration.)	ered Agent. You must designate an indiv	vidual or anot	ther	
Ť	-	and stand a gant one.	et o		
The name and th	e Florida street address of the r	egistered agent are:	<b>9</b>		
	Amy L Haney			<del>က</del>	- rather
	Name			-0	E E
	248 Windchime Way		2000 A 1610 A 1610 A	20	i Immera
	Florida street address (P.O. Box NOT acceptable)		(Th <sub>ij</sub> )	727	77
	Freeport, Fl. 32439		<u> </u>	-10	Secretary of a l
		ate, and Zip	25		- Programme
77 . 1	1			esad l	limaitae
	med as registered agent and to a pany at the place designated in t				
	nt and agree to act in this capac				
all statutes re	lating to the proper and complet	e performance of my duties, an	d I am fan	niliar	with
and accept the	obligations of my position as re	gistered agent as provided for	in Chapter	r 608,	, F.S
	Λ.,	/			
	[mited Al	2011			
	Registered Agent's Signat	ure (REQUIRED)			
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(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:

<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGRM	Robert Haney Sr.
	248 Windchime Way
	Freeport, Fl. 32439
MGR	Amy Haney
	248 WindchimeWay
	Freeport, Fl. 32439
(Use attachment if necessary)	
ARTICLE V: Effective date, if other th	an the date of filing: 9/16/13
•	must be specific and cannot be more than five business days
prior to or 90 days after the date of fili	ing.)
•	
	S Section 20 Section 2
<b>REQUIRED SIGNATURE:</b>	in the state of th
1	
HQ	
Signature of si	member or an authorized representative of a member
Signature of a-	womber of an authorized representative of a member-
(In accordance with secti	ion 608.408(3), Florida Statutes, the execution of this document
constitutes an attirmation I am aware that any false	n under the penalties of perjury that the facts stated herein are true.
	follows as analysided for in a 917 155 F.C.)

constitutes a third degree felony as provided for in s.817.155, F.S.)

Robert A Haney Sr. 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)