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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:

A Few Southern 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:

Lynne M. Paul

Name of Person

A Few Southern Properties LLC.

Firm/Company

3012 Silvermill Loop

Address

Land O Lakes, Florida 34638

City/State and Zip Code

pubmgmt@aol.com

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

For further information concerning this matter, please call:

Lynne Paul

,727

967-2149

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 & Certified Copy (additional copy is enclosed)

\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is englosed)

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:	:
A Few Southern Properties, LLC. (Must end with the words "Limited Liabi	ility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the p	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3012 Silvermill Loop	3012 Silvermill Loop
Land O Lakes, FL 34638	Land O Lakes, FL 34638
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regis business entity with an active Florida registration.) The name and the Florida street address of the Lynne M. Paul Name	registered agent are:
3012 Silvermill Loop Florida street ad	Idress (P.O. Box NOT acceptable)
Land O Lakes	34638
	tate, and Zip

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.

Registered Agent's Signature (REQUIRED)

(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:

Lynne M. Paul 3012 Silvermill Loop Land O Lakes, FL 34638	- -
3012 Silvermill Loop	<u> </u>
3012 Silvermill Loop	
3012 Silvermill Loop	
Land O Lakes, FL 34638	
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Michael Robertson	
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Tampa, FL 33602	
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	Tampa, FL 33602 Tampa, FL 33602 te of filing: 01/01/2014 e specific and cannot be more than five by

constitutes an affirmation under the penalties of perjury that 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.)

Lynne M. Paul

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)

(850) 245-6051.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: A Few Southern 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:

A Few Southern Properties LLC. Firm/Company 3012 Silvermill Loop Address Land O Lakes, Florida 34638 City/State and Zip Code pubmgmt@aol.com

For further information concerning this matter, please call:

Lynne Paul

Lyinic i ac	11	at(121)	1 10
Name	of Person	Area Code & Daytime Tele	ephone Number
Enclosed is a check f □\$125.00 Filing Fee	or the following amount: □\$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)

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

Mailing Address

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street/Courier Address Registration Section Division of Corporations Clifton Building

967-2149

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:

	end with the words "Limited Li	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Addı	ess:		
The mailing address a	and street address of the	principal office of the Limited L	Liability Company is:
Principal Office Add	dress:	Mailing Address:	
3012 Silvermill Loop		3012 Silvermill Loop	
Land O Lakes, FL 34638		Land O Lakes, FL 34638	
The Limited Liability Computer business entity with an action of the name and the Fig.	pany cannot serve as its own Re		ividual or another ano
The Limited Liability Combusiness entity with an action of the name and the Florida Liability Combusiness entity with an action of the name and the Florida Liability Combus Liability Combus Liability Combus Liability Comb	pany cannot serve as its own Reve Florida registration.) orida street address of the ynne M. Paul Na 012 Silvermill Loop	gistered Agent. You must designate an indi	's Signatures ividual or anothe
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The Limited Liability Combusiness entity with an action of the name and the Florida Liability Combusiness entity with an action of the name and the Florida Liability Combus Liability Combus Liability Combus Liability Comb	pany cannot serve as its own Reve Florida registration.) orida street address of the ynne M. Paul Na 012 Silvermill Loop	gistered Agent. You must designate an indi	e's Signatures (vidual or anothe)

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Registered Agent's Signature (REQUIRED)

(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:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing	1ember
MGRM	Lynne M. Paul
	3012 Silvermill Loop
	Land O Lakes, FL 34638
MGRM	Michael Robertson
	1226 East Cumberland Ave., Unit 220
	Tampa, FL 33602
	. fail (au)
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(Use attachment if nec	sary)
~~~~	(ODTION)
	other than the date of filing: 01/01/2014 (OPTIONA
	he date must be specific and cannot be more than five busine
o or 90 days after the d	e of filing.)
REQUIRED SIGNA	URE:
REQUIRED STORM	·····
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	June 1 Jul
Sign	ure 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	ffirmation under the penalties of perjury that the facts stated herein are true.
	any false information submitted in a document to the Department of State
constitutes a	rd degree felony as provided for in s.817.155, F.S.)

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)

Typed or printed name of signee