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COVER LETTER

TO: Registration Section **Division of Corporations** Friendly Capital Real Estate, 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: Leslie D. Hurst Name of Person Firm/Company 418 E. Miller Street Address Orlando, FL 32806 City/State and Zip Code LHurst@FriendlyCap.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Leslie Hurst 599-6161 Daytime Telephone Number Name of Person Enclosed is a check for the following amount: \$155.00 Filing Fee & \$160.00 Filing Fee, \$125.00 Filing Fee \$130.00 Filing Fee &

Mailing Address

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

Certificate of Status

Street/Courier Address

Certified Copy

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Certificate of Status &

Certified Copy (additional copy is enclosed)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:		
Friendly Capital Real Estate, LLC	giana del 1974 Companyon del 1979	W. F. C. 22
(Must end with the words "	'Limited Liability Company, "L.L.C.," o	or "LLC,")
ARTICLE II - Address:		
The mailing address and street address of the pri	neipal office of the Limited Liability Co	ompany is:
Principal Office Address:	Mailing Address:	
418 E. Miller Street	418 E. Miller Street	
Orlando, FL 32806	Orlando, FL 32806	
	_	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as another business entity with an active Florida re The name and the Florida street address of the re	s its own Registered Agent. You must de gistration.)	
The flame and the Florida street address of the re	gistered agent are.	
Leslie D. Hurst	None	
	Name	
418 E. Miller Street Florida street address (1	P.O. Box <u>NOT</u> acceptable)	
Orlando	FL 32806	
City	Zip	
Having been named as registered agent and to a the place designated in this certificate, I here capacity. I further agree to comply with the proof my duties, and I am familiar with and accepted. Registered Agent	by accept the appointment as registered ovisions of all statutes relating to the pro	agent and agree to act in this oper and complete performance
		∃SS ‡
(CO	ONTINUED)	14 JA SEORE
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		00 00 00 00 00 00 00 00 00 00 00 00 00

Title:		Name and Address:	
"AMBR" = Authorized "MGR" = Manager	l Member		
MGR	_	Leslie D. Hurst	
		418 E. Miller Street	
		Orlando, FL 32806	
	_		
	-		
			
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