## 114000053861

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
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SECRETARY OF STATE

APR - 2 2014

T. BROWN

## COVER LETTER

TO:	Registration Division of C			•
SUBJE	CT: FLORID	A FIRST COAST HOLDIN Name of Lim	NGS, LLC lited Liability Company	
The enc	losed Articles	of Organization and fee(s) are	e submitted for filing.	
Please r	eturn all corres	pondence concerning this ma	atter to the following:	
			Donna Williams Name of Person	
		Valen	tine Management Group Firm/Company	
		11111-70	San Jose Boulevard, Suite 16 Address	67
			cksonville, FL 32223	
			ity/State and Zip Code  nna@thevalgroup.com I for future annual report notifical	tion)
For furt	her information	concerning this matter, plea		
<u>Richar</u>	d E. Valentine Nam	e of Person	904 ) <u>571-1652</u> Area Code Daytime Tele	ephone Number
_	d is a check for Filing Fee	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)
	Regis Divis P.O.	ing Address stration Section sion of Corporations Box 6327 hassee, FL 32314	Street/Courier Addr Registration Section Division of Corporati Clifton Building 2661 Executive Center Tallahassee, FL 3230	ions er Circle

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	٠,
The name of the Limited Liability Company is:	T HOLDINGS, LLC jability Company, "L.L.C.," or "LLC.")
FLORIDA FIRST COAS	THOLDINGS LLC
	iability Company, "L.L.C.," or "LLC.")
(Must end With the Words Diffined Di	maining company, biblion, or back 1877
ARTICLE II - Address:	
The mailing address and street address of the principal offic	ce of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4836 ATLANTIC BOULEVARD, #210	Florida First Coast Holdings, LLC
JACKSONVILLE, FLORIDA 32207	11111-70 San Jose Boulevard, Suite 167
	Jacksonville, Florida 32223
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own Roanother business entity with an active Florida registration.)  The name and the Florida street address of the registered ag	egistered Agent. You must designate an individual or
Donna Williams	
Name	
11111-70 San Jose Boulevard,	
Florida street address (P.O. Box N	IOT acceptable)
Jacksonville	FL 32223
City	Zip

(CONTINUED)

Page 1 of 2

<u> Fitle:</u>	Name and Address:
AMBR" = Authorized Memb	r
MGR" = Manager	
MGR	Charles E. Dobson
	4832 Atlantic Boulevard, #210
	Jacksonville, FL 32207
MGR	Richard E. Valentine, Jr.
	12222 Reednand Drive West
	Jacksonville, FL 32223
	100
V: Effective date, if other the	n the date of filing: (OPTIONAL) ust be specific and cannot be more than five business days prior to or
CV: Effective date, if other the ctive date is listed, the date in filling.)  EVI: Other provisions, if any.	ust be specific and cannot be more than five business days prior to or
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