

L14 000073956

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600259823356

05/06/14--01007--011 **155.00

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2014 MAY -6 AM 11:19
NOT RECORDED
TO ACHIEVE
SUFFICIENCY OF FILINGS

FILED
2014 MAY -6 AM 9:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
MAY -6
T CL

CT Corporation System

1203 Governors Square Blvd, Suite 101, Tallahassee, FL, 3850-222-1092

ADH PROPERTIES LLC

Thank you!

- | | | |
|----------------------------------------------------|-------------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> Nonprofit | | |
| <input type="checkbox"/> Foreign | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| | <input type="checkbox"/> Reinstatement | |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input checked="" type="checkbox"/> LLC | <input type="checkbox"/> Name Registration | |
| | <input type="checkbox"/> Fictitious Name | <input type="checkbox"/> UCC |
| <input checked="" type="checkbox"/> Certified Copy | <input type="checkbox"/> Photocopies | <input type="checkbox"/> CUS |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem | |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out | | |

Name _____
 Availability _____
 Document _____
 Examiner _____
 Updater _____
 Verifier _____
 W.P. Verifier _____

5/6/2014
 CB

Order#: _____
 Biz-Filings _____
 Ref#: _____
 Amount: \$ _____

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
 2014 MAY -6 AM 9:05
 FILED

**ARTICLES OF ORGANIZATION
OF
ADH Properties LLC**

ARTICLE I NAME

The name of the limited liability company is: ADH Properties LLC

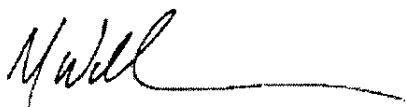
ARTICLE II ADDRESS

The principal place of business and mailing address of this Limited Liability Company shall be:
13799 Park Blvd. N. 106, Seminole, Florida 33776.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the registered agent are: Business Filings Incorporated, 515 E. Park Avenue, Tallahassee, Florida 32301. Located in the County of Leon.

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 605, F.S..



Signature: _____

Date: May 5, 2014

Mark Williams, A.V.P. *Business Filings Incorporated*

ARTICLE IV MANAGERS/MEMBERS

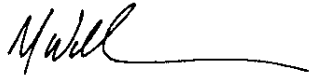
The management of the limited liability company is reserved for the managing members and the names and addresses of the members of the Limited Liability Company are:
Henk Eisinga, 13799 Park Blvd.N.106, Seminole, Florida 33776
Allison K. Eisinga, 13799 Park Blvd. N. 106, Seminole, Florida 33776

2014 MAY -6 PM 9:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

ARTICLE V DURATION

The duration for the limited liability company shall be: Perpetual.



Date: May 5, 2014

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document 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.)

Business Filings Incorporated, Organizer

Mark Williams, A.V.P.

Authorized Representative

Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison,

WI 53717

608-827-5300

2014 MAY -6 PM 9: 06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED