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Special Instructions to I	Filing Officer:	
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JUN - 3 2013 T. HAMPTON

## COVER LETTER

TO: 1	Registration Division of C	Section Corporations				
SUBJEC	Г:	Gulf Sou	of Lin	Prope mited Liability (	erfies, Company	110
The enclo	sed Articles	of Organization and fo	e(s) a	re submitted for	filing.	
Please ret	urn all corre	spondence concerning	this m	natter to the follo	owing:	
	<del></del>	Ronald.	M.	Mc De Name of Pers	DWELL	
		Sulf Sou	+	K Prop Firm/Compa	erties,	. LLC
		P.O. Bo	σχ	9/87	•	
	/					32550
	94/75	DUTH Drope E-mail address: (to)	oe use	City/State and Zi	p Code  COX. No	o <del>f</del>
		n concerning this matte				
RON	1 mc	DOWELL ne of Person	_ at (	850	699-8	585
	Nam	ne of Person		Area Code	Daytime Te	lephone Number
Enclosed i	s a check fo	r the following amount	::			)
<b>]</b> \$125.00 F	iling Fee	□\$130.00 Filing Fe Certificate of State		□\$155.00 Fi Certified C (additional co	-	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mai	ling Address		Stre	et/Courier Add	. AGES

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

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

## Effective Date 5/19/14

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Gulf South Properties, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

(The Limited Liability Company cannot serve as its own Registered Agent, You must designate an individual or

Robold W. McDowece

The mailing address and street address of the principal office of the Limited Liability Company is:

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

ARTICLE I - Name:

ARTICLE II - Address:

Principal Office Address:

The name of the Limited Liability Company is:

322 MIRAMAR BEACH, 36. MIRAMAR BEACH, 36.

another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

	MIRAMAR	OTHER	KU.				
Florida str	eet address (P.O. Box I	NOT accepta	ble)				
MIRA	MAR BEACH City	FL _	32,550				
<del></del>	City	<del>-</del> -	Zip				
Having been named as registered a the place designated in this cert capacity. I further agree to comp of my duties, and I am familiar w Rcg	ificate, I hereby accept i ly with the provisions of with and accept the oblig	the appointme fall statutes r gations of my r 605, F.S.	ent as registered elating to the pro position as regis.	agent and ag per and com	ree to act plete perf	in this ormanc	
	(CONTINUE	D)					
	Page I of 2				SECRETARY OF	2014 MAY 20 PM	FILE

Title:	Name and Address:
"AMBR" = Authorized Member	•
"MGR" = Manager	Ronald M. UCDOWELL
	PA COUNTY COOK
9	P.O. BOX 9187 MIRAMAR BEACH, 74, 3255
	THEY MINE BENCH, TU 325
	700 A.1 10 2
(Use attachment if necessary)	MAY 19, 2014
, , , , , , , , , , ,	
ctive date is listed, the date must be sp	e of filing: MAY 19, 2014 (OPTIONAL)  Decific and cannot be more than five business days prior to or 90
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retive date is listed, the date must be sp f filling.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a m  (In accordance with section 6)	Manufactured representative of a member.  05.0203 (1) (b), Florida Statutes, the execution of this document
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ARTICLE IV-

Page 2 of 2

FILED 2011 HAY 20 PM 3: 32 SECRETARY OF STATE SECRETARY OF STATE