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Office Use Only



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B. BOSTICK

JUN - 3 2014

EXAMINER

COVER LETTER

TO:	Registration Division of	n Section _s Eorporations	ż	هن ۲	909 1810	, #**		
SUBJI	ect: Pe	eanut Pro	Der	Hes, LLC mited Liability Company	,			
5000		Nam	ne of Li	mited Liability Company				
The en	closed Articles	of Organization and	fee(s) a	re submitted for filing.				
Please	return all corre	spondence concernin	g this m	natter to the following:				
		David	D	ا ه				
				Name of Person				
		Pean	- +ی	Properties				
				Properties Firm/Company		· · · · · · · · · · · · · · · · · · ·		
		665 T	anq	lewood Trai	1			
				Address				
		Atlan	+a	GA 303A City/State and Zip Code	1			
		Kelly, d	oll L	d for future annual report not	(fication)			
F 6	41				incurion)		(<u>)</u>	
ror iun	iner informatio	n concerning this mad	iter, pież	ase call:		· * . *	- 1754 - 755 - 445	14 14 14 14 14 14 14 14 14 14 14 14 14 1
H	Kelly D	1001	at (404 1 550-8	134		, <u>, , , , , , , , , , , , , , , , , , </u>	E CONTRACTOR OF THE PARTY OF TH
	Nan	ne of Person		Ho4 550-8 Area Code Daytime	Telephor	ne Number	્ ⊶ . 173	ž K
Enclose	ed is a check fo	or the following amou	nt:			ر نے رواب مرکز	11 WAY 27 P # 2	(
]\$125.0	0 Filing Fee	S130.00 Filing F Certificate of St		\$155.00 Filing Fee & Certified Copy (additional copy is enclose	d) (160.00 Filing Certificate of S Certified Copy ditional copy is	Fee, tatus &)
	Reg Div P.O	iling Address istration Section ision of Corporations . Box 6327 ahassee, FL 32314		Street/Courier A Registration Section Division of Corp Clifton Building 2661 Executive C Tallahassee, FL 3	on orations Center Cir	rcle		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
Pean of Properties, LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: 2611 South Ponte Vedra Back 65 Tanglewood Trail S. Ponte Vedra Beach, FL Atlanta, GA 30327 32082
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
David Doll Name
2611 South Ponte Vedra Blvd. Florida street address (P.O. Box NOT acceptable)
S. Ponte Vedra Beach, 32082
S. Ponte Vedra Beadfl 32082 City 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 605, F.S Registered Agent's Signature (REQUIRED)

Page 1 of 2

(CONTINUED)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	Kelly Doll 665 Tanglewood Trail Atlanta, GA 30327
(Use attachment if necessary)	
LE V: Effective date, if other than the date of fective date is listed, the date must be spe of filing.)	of filing: (OPTIONAL) cific and cannot be more than five business days prior to or 90 d
LE V: Effective date, if other than the date of fective date is listed, the date must be spe	of filing: (OPTIONAL) cific and cannot be more than five business days prior to or 90 d
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REQUIRED SIGNATURE: Signature of meeting and make the date of silver of sil	mber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document representative of perjury that the facts stated herein are true, mation submitted in a document to the Department of State y as provided for in s.817.155, F.S.) Typed or printed name of signee Filing Fees: ganization and Designation of Registered Agent

The name and address of each person authorized to manage and control the Limited Liability Company:

ARTICLE IV-