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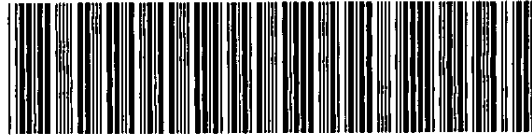
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 JUN 17 AM 10:19

DIVISION OF CORPORATE AFFAIRS

14 JUN 17 PM 4:19

FILED

RECEIVED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AJ Calhoun Properties, 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:

Connie Shivers
Name of Person

Penson Law Firm, P.A.
Firm/Company

2810 Remington Green Circle
Address

Tallahassee, FL 32308
City/State and Zip Code

chs@pendd.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Connie at (850) 561-8000
Name of Person Area Code Daytime Telephone Number

*Please call
when ready*

Enclosed is a check for the following amount:

- | | | | |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|---|---|---|---|

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

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION
AJ CALHOUN PROPERTIES, LLC
A LIMITED LIABILITY COMPANY
(Pursuant to Chapter 608, Florida Statutes)

FILED
2014 JAN 17 PM 10:19
REC'D CLERK OF COURT
TALLAHASSEE, FLORIDA

1. **Name.** The name of the limited liability company is:

AJ CALHOUN PROPERTIES, LLC

2. **Purpose.** The purpose of this limited liability company may include the transaction of any and all lawful business for which limited liability companies may be organized in the state of Florida.

3. **Address of Principal Office.** The street address of the principal office of the limited liability company is:

2810 Remington Green Circle
Tallahassee, Florida 32309

4. **Mailing Address.** The mailing address of the limited liability company is:

2810 Remington Green Circle
Tallahassee, Florida 32309

5. **Manager at Time of Formation.** The name of each manager at the time of formation:

Albert C. Penson
2810 Remington Green Circle
Tallahassee, Florida 32312

6. **Period of Duration.** The period of duration shall be perpetual until it is dissolved or liquidated and its affairs wound up.

7. **Management.** Management of the Limited Liability Company at the time of formation is by Managers appointed by the Member(s). If more than one Manager is appointed, either Manager shall have authority to act on behalf of the Company.

8. **Registered Agent, Registered Office, and Registered Agents Signature.** The name and the Florida Street address of the registered agent are:

Albert C. Penson
2810 Remington Green Circle, 1st Floor
Tallahassee, Florida 32308

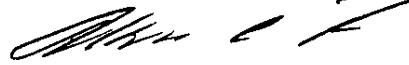
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this Certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisional of all 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 608, F.S.



Albert C. Penson

9. **Effective Date.** The effective date of the limited liability company shall be:

June 17, 2014



Albert C. Penson
Manager

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true and correct.)

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2014 JUN 17 AM 10:19
CLERK OF COURT
TALLAHASSEE, FLORIDA