

L14000155739

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

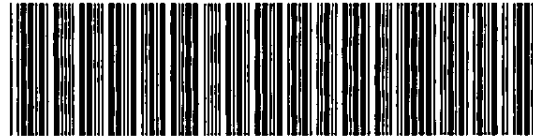
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: REGISTRATION SECTION DIVISION OF CORPORATIONS

SUBJECT:

3205 MCAFEE ROAD HOLDINGS, 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:

**STEPHEN HUNTER JOHNSON, ESQ.
LYDECKER DIAZ
1221 BRICKELL AVE, 19TH FLOOR
MIAMI, FL 33131
shj@lydeckerdiaz.com**

For further information concerning this matter, please call:

**STEPHEN HUNTER JOHNSON, ESQ.
at
(305) 415-6354**

Enclosed is a check for the following amount:

\$125.00 Filing Fee

\$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)

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 FOR LIMITED LIABILITY COMPANY

ARTICLE I – NAME

The name of the Limited Liability Company shall be:

3205 MCAFFEE ROAD HOLDINGS, LLC

ARTICLE II – PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

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

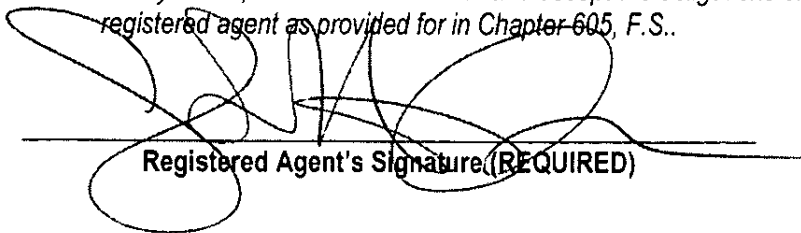
**835 MULLRANY DR.
COPPELL, TX 75019**

ARTICLE III – REGISTERED AGENT, REGISTERED OFFICE AND REGISTERED AGENT'S SIGNATURE

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

**STEPHEN HUNTER JOHNSON, ESQ.
LYDECKER DIAZ
1221 BRICKELL AVE, 19TH FLOOR
MIAMI, FL 33131**

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)

(CONTINUED)

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ARTICLE IV – MANAGEMENT AND AUTHORIZED MEMBERS

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

Title: (*AMBR* = Authorized Member / *MGR* = Manager)

Name and Address:

MANAGER & AUTHORIZED MEMBER

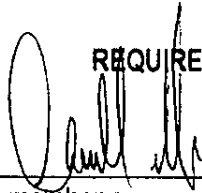
**BLACKACRE, LLC
835 MULLRANY DR.
COPPELL, TX 75019**

ARTICLE V – EFFECTIVE DATE

The Effective Date of these Articles of Organization shall be:

SEPTEMBER²⁴, 2014

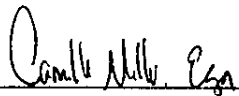
REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(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.)



Typed or printed name of signee

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TALLAHASSEE, FLORIDA