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COVER LETTER 546

TO: Registration Section Division of Corporations
SUBJECT: D Southern home projects, 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:
Phillip J Brown
Southern Home Projets, LCC
Firm/Company
34 Industrial loop Ste 200
Address
Orange Park F1 32073
Orange Park Fl 32073 City/State and Zip Code Moto Krazed 1@gma:1- Com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Phillip J Brown at 9.04 52.9-1339 Name of Person Area Code Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S125.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, 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 FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Southern Home Projec	+8, LLC
(Must end with the words "Limited Liability Com	pany, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Lin	nited Liability Company is:
Principal Office Address: Mailing Ad	ldress:
34 Industrial loop Ste 200 34 Ir Orange Park Fl 32073 Orang	e Perk Fl 32073
ARTICLE III - Registered Agent, Registered Office, & Registered (The Limited Liability Company cannot serve as its own Registered Aganother business entity with an active Florida registration.)	
The name and the Florida street address of the registered agent are: Phillip J Brown 34 Industrial Name 100p Ste	 2. 200
Florida street address (P.O. Box NOT accepta	
Orange Park FL 1	
City	Zip
Having been named as registered agent and to accept service of process the place designated in this certificate, I hereby accept the appointme capacity. I further agree to comply with the provisions of all statutes re of my duties, and I am familiar with and accept the obligations of my Chapter 605, F.S.	ent as registered agent and agree to act in this elating to the proper and complete performance
1200	
Registered Agent's Signature (REQUIR	ED) 7.
(CONTINUED)	OCT I
Page Lof 2	7 AH 7: 0 SFEFLOR

"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	01/1/2 18
MGR	Phillip J Brown
	34 Industrial 1600 Ste 200
1 50	Orange Park Fl 32073
MGR	Aleksandar MihiC
	ado theory ridge or Apt
۸	Jackson ville 19 32222
MGR	william C Brown.
 	7299 argyle corners or.
	jackson ville F1 32244
	
(Use attachment if necessary)	
of filling.)	pecific and cannot be more than five business days prior to or 90
of filling.)	pecific and cannot be more than five business days prior to or 90
of filling.)	pecific and cannot be more than five business days prior to or 90
of filing.) E VI: Other provisions, if any.	pecific and cannot be more than five business days prior to or 90
of filing.) E VI: Other provisions, if any.	Or Page 1
E VI: Other provisions, if any. REQUIRED SIGNATURE:	9-B-
E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a m (In accordance with section 6)	ember or an authorized representative of a member. 05.0203 (1) (b), Florida Statutes, the execution of this document
REQUIRED SIGNATURE: Signature of a m (In accordance with section 6) constitutes an affirmation und	ember or an authorized representative of a member. 05.0203 (1) (b), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true.
E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a m (In accordance with section 6) constitutes an affirmation und I am aware that any false info	ember or an authorized representative of a member. 05.0203 (1) (b), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true. rmation submitted in a document to the Department of State:
REQUIRED SIGNATURE: Signature of a m (In accordance with section 6) constitutes an affirmation and I am aware that any false info constitutes a third degree felo	ember or an authorized representative of a member. 05.0203 (1) (b), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true. rmation submitted in a document to the Department of States my as provided for in s.817.155, F.S.)
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ARTICLE IV-