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| (Re | questor's Name) | |
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| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | y/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nar | me) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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2 06/08/15

EFFECTIVE DATE 06/01/15

COVER LETTER

| TO: | Registration S Division of Co | | | | |
|-----------|----------------------------------|--|------------------|--|--|
| SUBJE | Cole Hom | es, LLC | | | |
| SUDJE | | Name of | Limited Liabil | ity Company | |
| The end | closed Articles o | f Organization and fee(s) |) are submitted | for filing. | |
| Please | return all corresp | ondence concerning this | matter to the f | following: | |
| | Bruce C Co | le | | | |
| | | ··· | Name of | Person | |
| | | | | | |
| | | | Firm/Co | mpany | |
| | 709 Riverbo | end Blvd | | | |
| | | | Addr | ess | |
| | Longwood, | FL 32779 | | | |
| | bcolehome@ | bellsouth.net | City/State an | d Zip Code | |
| | <u></u> | E-mail address: (to be us | sed for future a | innual report notificati | on) |
| For furth | er information co | oncerning this matter, plo | ease call: | | |
| | Bruce Cole | at | 407 (| 709-1282 | |
| | Nan | ne of Person | Area Code | Daytime Telephone | e Number |
| Enclose | ed is a check for | the following amount: | | | |
| | 0 Filing Fee | \$130.00 Filing Fee & Certificate of Status | Certifi | 00 Filing Fee & ed Copy al copy is enclosed) | \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | Regist Divisi P.O. E | ng Address ration Section on of Corporations 30x 6327 nassee, FL 32314 | | Street Address Registration Section Division of Corporation Clifton Building 2661 Executive Cente Tallahassee, FL 3230 | er Circle |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| Cole Homes, L | | | |
|---|---|--|--|
| (Mus | t end with the words "Limited Li | ability Company | v, "L.L.C.," or "LLC.") |
| ARTICLE II - Address: | | | |
| | reet address of the principal offic | e of the Limited | Liability Company is: |
| <u>P</u> 1 | incipal Office Address: | | Mailing Address: |
| | m | 700 | Riverbend Blvd |
| 709 Riverbend | Blvd | 10) | |
| ARTICLE III - Registere (The Limited Liability Coranother business entity wi | d Agent, Registered Office, & Inpany cannot serve as its own Re.h an active Florida registration.) | Long Registered Ageigistered Agent. | gwood, FL 32779 |
| ARTICLE III - Registere (The Limited Liability Cor another business entity wi | d Agent, Registered Office, & Inpany cannot serve as its own Reth an active Florida registration.) | Long Registered Ages gistered Agent. | gwood, FL 32779 nt's Signature: |
| ARTICLE III - Registere (The Limited Liability Cor another business entity wi | d Agent, Registered Office, & Inpany cannot serve as its own Resh an active Florida registration.) street address of the registered ag | Long Registered Ages gistered Agent. | gwood, FL 32779 nt's Signature: |
| ARTICLE III - Registere (The Limited Liability Cor another business entity wi | d Agent, Registered Office, & Inpany cannot serve as its own Resh an active Florida registration.) street address of the registered ag | Registered Ageigistered Agent. | gwood, FL 32779 nt's Signature: |
| ARTICLE III - Registere (The Limited Liability Cor another business entity wi | d Agent, Registered Office, & Inpany cannot serve as its own Reth an active Florida registration.) street address of the registered agence C Cole | Registered Ager gistered Agent. ent are: | gwood, FL 32779 nt's Signature: You must designate an individual or |
| ARTICLE III - Registere (The Limited Liability Cor another business entity wi | d Agent, Registered Office, & Inpany cannot serve as its own Reth an active Florida registration.) street address of the registered agence C Cole N 709 Riverbend Blvd | Registered Ager gistered Agent. ent are: | gwood, FL 32779 nt's Signature: You must designate an individual or |

am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

15 1114 -1, PM 3: 46

| <u>Title:</u> "AMBR" = Authorized Mem | Name and Address: ber |
|---|--|
| MGR" = Manager | D 001 |
| MGR | Bruce C Cole |
| | 709 Riverbend Blvd |
| | Longwood, FL 32779 |
| AMBR | Katherine A Cole |
| | 709 Riverbend Blvd |
| | Longwood, FL 32779 |
| | |
| | |
| | |
| | |
| | |
| | |
| Use attachment if necessary) | |
| 5 N. 17 CC - 41 4 - 4 - 10 - 41 - 41 | nan the date of filing: June 1, 2015 (OPTIONAL) |
| ctive date is listed, the date filing.) the date inserted in this blockent's effective date on the E | must be specific and cannot be more than five business days prior to or 90 c does not meet the applicable statutory filing requirements, this date will not be partment of State's records. |
| ctive date is listed, the date [filing.] he date inserted in this block nent's effective date on the E VI: Other provisions, if any REOURED SIGNATURE Signat (In accordance) | t does not meet the applicable statutory filing requirements, this date will not department of State's records. The properties of a member or an authorized representative of a member. The with section 605.0203 (1) (b), Florida Statutes, the execution of this documents. |
| ctive date is listed, the date [filing.] he date inserted in this block tent's effective date on the E E VI: Other provisions, if any REOURED SIGNATURE Signat (In accordance constitutes ar I am aware the constitutes a | are of a member or an authorized representative of a member. we with section 605.0203 (1) (b), Florida Statutes, the execution of this document affirmation under the penalties of perjury that the facts stated herein are true that any false information submitted in a document to the Department of State third degree felony as provided for in s.817.155, F.S.) |
| ctive date is listed, the date filing.) he date inserted in this blockent's effective date on the E EVI: Other provisions, if any REOURED SIGNATURE Signat (In accordance constitutes ar I am aware the constitutes a | are of a member or an authorized representative of a member. we with section 605.0203 (1) (b), Florida Statutes, the execution of this document affirmation under the penalties of perjury that the facts stated herein are true that any false information submitted in a document to the Department of State third degree felony as provided for in s.817.155, F.S.) |
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| ctive date is listed, the date filing.) he date inserted in this blockent's effective date on the E EVI: Other provisions, if any Signat (In accordance constitutes ar I am aware the constitutes a Bruce | does not meet the applicable statutory filing requirements, this date will not be partment of State's records. The with section 605.0203 (1) (b), Florida Statutes, the execution of this document affirmation under the penalties of perjury that the facts stated herein are true and any false information submitted in a document to the Department of State third degree felony as provided for in s.817.155, F.S.) C Cole Typed or printed name of signee Filing Fees: |
| ctive date is listed, the date filing.) the date inserted in this blockment's effective date on the E VI: Other provisions, if any REOURED SIGNATURE Signat (In accordance constitutes ar I am aware the constitutes a Bruce \$125.00 Filing Fee for Art | are of a member or an authorized representative of a member. The with section 605.0203 (1) (b), Florida Statutes, the execution of this document affirmation under the penalties of perjury that the facts stated herein are true third degree felony as provided for in s.817.155, F.S.) C Cole Typed or printed name of signce Filing Fees: icles of Organization and Designation of Registered Agent |
| ctive date is listed, the date f filing.) the date inserted in this blockment's effective date on the E E VI: Other provisions, if any REOURED SIGNATURE Signat (In accordance constitutes ar I am aware the constitutes a Bruce | does not meet the applicable statutory filing requirements, this date will not be partment of State's records. The with section 605.0203 (1) (b), Florida Statutes, the execution of this document affirmation under the penalties of perjury that the facts stated herein are true that any false information submitted in a document to the Department of State third degree felony as provided for in s.817.155, F.S.) C Cole Typed or printed name of signee Filing Fees: icles of Organization and Designation of Registered Agent Optional) |

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