

L 15000157126

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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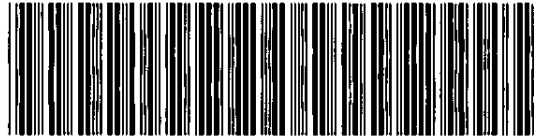
(Business Entity Name)

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15 SEP 18 PM 10:15
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

SEP 18 2015

S. GILBERT

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Montgomery Howard 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:

Stacey Smelser Webb

Name of Person

Firm/Company

3789 Overlook Drive

Address

Tallahassee, FL 32311

City/State and Zip Code

sswebb@me.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stacey Smelser Webb

at

850

590-2766

Name of Person

Area Code

Daytime Telephone Number

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

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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ARTICLES OF ORGANIZATION
OF
MONTGOMERY HOWARD PROPERTIES, LLC

OFFICE OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I -- NAME

The name of the limited liability company is Montgomery Howard Properties, LLC,
("company").

ARTICLE II -- ADDRESS

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

Principal Office Address:
3789 Overlook Drive
Tallahassee, Florida 32311

Mailing Address:
3789 Overlook Drive
Tallahassee, Florida 32311

ARTICLE III - REGISTERED AGENT,
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

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

Stacey Smelser Webb
3789 Overlook Drive
Tallahassee, Florida 32311

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.



Stacey Smelser Webb

ARTICLE IV - MANAGERS OR MEMBERS

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

Title:

"MGR" = Manager

"AMBR" = Authorized Member

Name and Address:

MGR

Stacey Smelser Webb
3789 Overlook Drive
Tallahassee, Florida 32311

MGR

John Howard Webb
3789 Overlook Drive
Tallahassee, Florida 32311

REQUIRED SIGNATURE:



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

This document is executed in accordance with section 605.0203(1)(b), Florida Statutes. 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.

Stacey Smelser Webb

Typed or printed name of signee