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# **COVER LETTER**

	Registration Section Division of Corporations
CHDIEC	VOLUSIA-FLAGLER REAL ESTATE SERVICES, LLC
SUBJEC	Name of Limited Liability Company
The enclo	sed Articles of Organization and fee(s) are submitted for filing.
Please ret	urn all correspondence concerning this matter to the following:
	KIMBERLY B BELL
	Name of Person
	VOLUSIA-FLAGLER REAL ESTATE SERVICES, LLC
	Firm/Company
	124 N NOVA ROAD, #125
	Address
	ORMOND BEACH, FL 32174
	City/State and Zip Code kimbell.fl@gmail.com
	E-mail address: (to be used for future annual report notification)
For further	information concerning this matter, please call:
	Kimberly B Bell 386 212-8686
	Name of Person Area Code Daytime Telephone Number
Enclosed	s a check for the following amount:
\$125.00 F	Siling Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \ \text{Certified Copy (additional copy is enclosed)} \ \text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \ \text{Certified Copy (additional copy is enclosed)} \ Certified
	Malling Address

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

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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Marie Maria	STATE SEEL PLORIDA

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The name of the Limited Liability Company is:

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VOLUSIA:	-FLAGI	FRREAL	FSTATE	SERVICES.	LIC
A OPOSITY.				DUIL VICTOR	

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

# ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
124 N NOVA ROAD, #125	124 N NOVA ROAD, #125
ORMOND BEACH, FL 32174	ORMOND BEACH, FL 32174

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

KIMBERLY B BELL		
	Name	
124 N NOVA ROAD,	#125	
Florida street address (	P.O. Box <b>NOT</b>	acceptable)
ORMOND BEACH	FL	32174
City	State	Zip

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)

Page 1 of 2

"ANDD   - Andbowe - 1 N 1	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager MGR	KIMBERLY B BELL
WOK	124 N NOVA ROAD, #125
	ORMOND BEACH, FL 32174
MGR	ERIC P BELL
	124 N NOVA ROAD, #125
	ORMOND BEACH, FL 32174
EV: Effective date, if other than the date of ctive date is listed, the date must be specifiling.) the date inserted in this block does not me	of filing: (OPTIONAL)  cific and cannot be more than five business days prior to or 9  eet the applicable statutory filing requirements, this date will no
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