

L16000170648

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000226353 3)))



H16000226353ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : AMELIA LAW GROUP, PLLC
Account Number : I201400C0037
Phone : (904) 310-9501
Fax Number : (904) 310-9538

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: LChismeAmeliaLawgroup.com

FLORIDA LIMITED LIABILITY CO.

Flansouth, LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

16 SEP 12 PM 4:38

16 SEP 12 PM 10:35

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 SEP 2 PM 10:35
p.2
(((H160002263523)))

**ARTICLES OF ORGANIZATION
OF
FLANSOUTH, LLC**

These Articles of Organization are submitted for the purpose of forming a limited liability company pursuant to the Revised Florida Limited Liability Company Act, Chapter 605, Florida Statutes, as the same may from time to time be amended (the "Act").

ARTICLE I - NAME

The name of this limited liability company (the "Company") is **Flansouth, LLC**.

ARTICLE II - ADDRESS

The address of the principal office is 960194 Gateway Boulevard, Suite 101, Amelia Island, Florida 32034, and the mailing address of this Company is 35 Echo Ridge Road, Upper Saddle River, New Jersey 07458.

ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this Company is 960194 Gateway Boulevard, Suite 101, Amelia Island, Florida 32034 and the name of its initial registered agent at such address is Lorie L. Chism.

ARTICLE IV - MANAGEMENT OF THE COMPANY

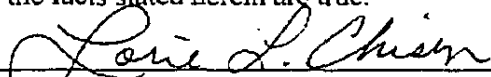
The Company is to be managed by one or more managers and is, therefore, a manager-managed company. The name and address of the initial person authorized to manage and control the Company is as follows:

Patricia Flannery
35 Echo Ridge Road
Upper Saddle River, New Jersey 07458

ARTICLE V - LIMITED LIABILITY

Except as otherwise expressly provided by the Act, no member, manager, officer, agent or employee of the Company shall be personally liable for the debts, obligations or liabilities of the Company, whether arising in contract, tort or otherwise, or for the acts or omissions of any other member, manager, officer, agent or employee of the Company.

IN WITNESS WHEREOF, the undersigned, being an authorized representative of a Member of the Company, has executed these Articles of Organization this 9th day of September, 2016. 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.


Lorie L. Chism, Esquire
Authorized Representative

(((H16000226352 3)))

(((H16000226352 3)))

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 605, Florida Statutes, the below named limited liability company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

- I. The name of the limited liability company is:

Flansouth, LLC

2. The name and address of the registered agent and office are:

**Lorie L. Chism, Esquire
960194 Gateway Boulevard, Suite 101
Amelia Island, Florida 32034**

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.

Dated: September 9, 2016.

Signature of Registered Agent


Lorie L. Chism, Esquire

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 SEP 12 PM 10:35

(((H16000226352 3)))