

**L16000178254**

**Florida Department of State  
Division of Corporations  
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**To:**

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

**From:**

Account Name : GREENE HAMRICK QUINLAN & SCHERMER, P.A.  
Account Number : I19990000030  
Phone : (941) 747-1871  
Fax Number : (941) 745-2866

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

**Email Address:** \_\_\_\_\_

**FLORIDA LIMITED LIABILITY CO.****Freedom Jones Townhome, LLC**

Certificate of Status	1
Certified Copy	1
Page Count	01
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**N. SAMS**

**SEP 26 2016**

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Freedom Jones Townhome, LLC

**ARTICLE II - Address:**

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

2 N. Tamiami Trail, Suite 104  
Sarasota, Florida 34236

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

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

Robert F. Greene, Esq.  
801 12<sup>th</sup> Street West  
Bradenton, Florida 34205

*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 property 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.*

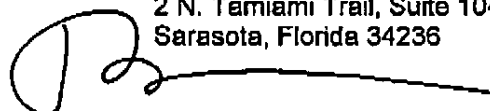
  
\_\_\_\_\_  
SIGNATURE

**ARTICLE IV - Management:**

The name and address of each person/entity authorized to manage and control the limited liability company:

Title:  
MGR

Name and Address:  
Elizabeth B. Jones  
2 N. Tamiami Trail, Suite 104  
Sarasota, Florida 34236

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

(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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided in section 817.155, Florida Statutes)

Robert F. Greene  
Typed or printed name of signee

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