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COVER LETTER

	Registration Section Division of Corporations					
SUBJEC	Ashley's Auctions and Appraisals, LLC					
SUBJECT: Name of Limited Liability Company						
The encl	osed Articles of Organization and fee(s) are submitted for filing.					
Please re	turn all correspondence concerning this matter to the following:					
	Charles Brian Ashley					
	Name of Person					
	Firm/Company					
	2045 Gibson Road					
	Address					
	Jacksonville / Florida 32207					
	City/State and Zip Code					
	ashleys.auctions.appraisals@gmail.com					
	E-mail address: (to be used for future annual report notification)					
For further	r information concerning this matter, please call:					
	Charles Brian Ashley 904 910-3872					
	Name of Person Area Code Daytime Telephone Number					
Enclosed	l is a check for the following amount:					
\$125.00	Filing Fee \$\ \times \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{\$\frac{160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)} \text{\$\frac{160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)} \text{\$\frac{160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)} \text{\$\frac{160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)} \text{\$\frac{160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{\$\frac{160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{\$\frac{160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{\$\frac{160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{\$\frac{160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{\$\frac{160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{\$\frac{160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{\$\frac{160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{\$\frac{160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{\$\frac{160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{\$\frac{160.00 Filing Fee}{160.00 Filing Fee}} \$					
	Mailing Address Street Address					
	New Filing Section New Filing Section Division of Corporations Division of Corporations					
	LIIVISION OF CORNORATIONS LIIVISION OF CORNORATIONS					

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

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	•			FILED
The name of the Limited Liability	Company is:			FILED 2016 OCT 14 PM 2: 47
Ashley's Auctions and				With the later of william
(Must end w	ith the words "Limited	Liability Company	, "L.L.C.," or "LLC") THIN SOLE, FLORIDA
ARTICLE II - Address: The mailing address and street address	dress of the principal o	ffice of the Limited		
<u>Principa</u>	Office Address:		Mailing A	ddress:
2045 Gibson Road Jacksonville, FL 32207 ARTICLE III - Registered Age (The Limited Liability Company of another business entity with an act	cannot serve as its own ctive Florida registration	A Registered Agent. Registered Agent. On.)	nt's Signature:	n individual or
	Charles Brian Ashle			_
		Name		
	2045 Gibson Road			_
	Florida street addres			
	Jacksonville	Florida	32207	_
	City	State	Zip	
Having been named as registered a place designated in this certificate,	hereby accept the app	ointment as register	ed 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

ARTICLE IV- The name and address of each person authorized	to manage and control the Limited Liability Company:	FILED
Title: "AMBR" = Authorized Member	Name and Address:	2016 OCT 14 PM 2: L
"MGR" = Manager AMBR	Charles Brian Ashley 2045 Gibson Road Jacksonville, FL 32207	ALLAHASSEE. FLORIC L
AMBR	Kimberly Smith Ashley 2045 Gibson Road Jacksonville, FL 32207	- - -
		- - -
		- - -
(Use attachment if necessary)		
ARTICLE V: Effective date, if other than the date of filing (If an effective date is listed, the date must be specific an the date of filing.) Note: If the date inserted in this block does not meet the the document's effective date on the Department of State	d cannot be more than five business days prior to or sapplicable statutory filing requirements, this date will n	
ARTICLE VI: Other provisions, if any. The purpose of Ashley's Auctions and Appraisals, LLC is	s to engage in any lawful activity.	
REQUIRED SIGNATURE: Signature of a member of	Suc Obluver an authorized representative of a member.	
This document is executed in ac I am aware that any false inform	coordance with section 605.0203 (1) (b), Florida Statutes ation submitted in a document to the Department of Stat as provided for in s.817.155, F.S.	
<u>Charles Brian Ashley</u> Typed	d or printed name of signee	

Filing Fees:
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)