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(Requestor's Name)	_
(Address)	
(Address)	
(City/State/Zip/Phone #)	-
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	
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COVER LETTER

	gistration Section vision of Corporations			,
SUBJECT:	610-612 Magnolia Drive, LLC			
SOBJECT.	Name of L	imited Liabilit	y Company	
The enclose	d Articles of Organization and fee(s)	are submitted t	for filing.	
Please return	n all correspondence concerning this	matter to the fo	llowing:	
	F. Marshall Deterding			
•		Name of I	Person	
•		Firm/Con	npany	
	2101 Ox Bottom Road			
- -		Addre	SS	
	Tallahassee, Fl. 32312			
	Aartydet@comcast.net	City/State and	Zip Code	
	E-mail address: (to be use	ed for future ar	nual report notification	on)
For further in	formation concerning this matter, plea	ase call:		
1	F. Marshall Deterding	850	668-0800	
-	Name of Person	Area Code	Daytime Telephone	Number
Enclosed is	a check for the following amount:			
\$125.00 Fil	_	LCertifie	Diling Fee & Copy I copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address		Street Address	
	New Filing Section Division of Corporations		New Filing Section Division of Corporation	ons
	P.O. Box 6327 Tallahassee, FL 32314	(Clifton Building	

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

J. V.	-4.st 1.48,
2816 NOV 28	AH 8: 12
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ARTICLE 1 - Name:

The name of the Limited Liability Company is:

610-612	Magnolia	Drive	110
010-012	IVIAGIIQIIA	DIIVE.	بالدليا

(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:
2101 Ox Bottom Road Tallahassee, Fl. 32312	2101 Ox Bottom Road Tallahassee, Fl. 32312
ARTICLE III - Registered Agent, Registered Office, & Reg (The Limited Liability Company cannot serve as its own Regist another business entity with an active Florida registration.)	
The name and the Florida street address of the registered agent	are:

F. Marshall Deterding	ng	
	Name	,
2101 Ox Bottom Ro	ad	
Florida street addres	ss (P.O. Box <u>NOT</u> acc	eptable)
Tallahassee	Florida	32312
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

	Name and Address:
"AMBR" = Authorized Member	MARLIBE Holdings, LLC.
"MGR" = Manager MGR	F. Marshall Deterding Managing member
MOK	2101 Ox Bottom Road
	Tallahassee, Fl. 32312
	Tallanassee, rt. 32312
	
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(Use attachment if necessary) ICLE V: Effective date if other than the date	offiling: (Tabulaci, 2, 2017 (OPTIONAL)
TICLE V: Effective date, if other than the date in effective date is listed, the date must be spedate of filing.) te: If the date inserted in this block does not n document's effective date on the Department.	of filing: <u>January</u> <u>2</u> , <u>2017</u> . (OPTIONAL) ecific and cannot be more than five business days prior to or 90 days after neet the applicable statutory filing requirements, this date will not be listed as of State's records.
TICLE V: Effective date, if other than the date an effective date is listed, the date must be spedate of filing.)	neet the applicable statutory filing requirements, this date will not be listed as
TICLE V: Effective date, if other than the date in effective date is listed, the date must be spedate of filing.) te: If the date inserted in this block does not in document's effective date on the Department of TICLE VI: Other provisions, if any. REQUIRED SIGNATURE:	neet the applicable statutory filing requirements, this date will not be listed as of State's records. Managing Member, MARLIBE Holding
TICLE V: Effective date, if other than the date in effective date is listed, the date must be spendate of filing.) te: If the date inserted in this block does not in document's effective date on the Department of TICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me	neet the applicable statutory filing requirements, this date will not be listed as of State's records. Managing Members MARIJBE Holding embers an authorized representative of a member.
TICLE V: Effective date, if other than the date in effective date is listed, the date must be spendate of filing.) te: If the date inserted in this block does not in document's effective date on the Department of the Department	meet the applicable statutory filing requirements, this date will not be listed as of State's records. Managing Member MARLIBE Holding ember of a member. Tendent and cannot be more than five business days prior to or 90 days after a member and attention of the more than a member. The state of a member
REQUIRED SIGNATURE: Signature of a me This document is execut I am aware that any false	Makes Member MARIJBE Holding members and authorized representative of a member. The median authorized representative of a member. The member of State in accordance with section 605.0203 (1) (b), Florida Statutes. The information submitted in a document to the Department of State
ricle V: Effective date, if other than the date n effective date is listed, the date must be speciate of filing.) ie: If the date inserted in this block does not n document's effective date on the Department of the Department o	meet the applicable statutory filing requirements, this date will not be listed as of State's records. Managing Member MARLIBE Holding ember of a member. Tendent and cannot be more than five business days prior to or 90 days after a member and authorized representative of a member. Tendent accordance with section 605.0203 (1) (b), Florida Statutes.

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)

ARTICLE IV-