Electronic Articles of Organization
For
Florida Limited Liability Company

L16000219865
FILED 8:00 AM
December 05, 2016
Sec. Of State
slsingleton

Article I

The name of the Limited Liability Company is:

SIMMONS LAND SPECIALISTS, LLC

Article II

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

5572 SW 111TH LANE
LAKE BUTLER, FL. 32054

The mailing address of the Limited Liability Company is:

5572 SW 111TH LANE
LAKE BUTLER, FL. 32054

Article III

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

TIFFANY M SIMMONS
5572 SW 111TH LANE
LAKE BUTLER, FL. 32054

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.

Registered Agent Signature: TIFFANY M. SIMMONS

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Article IV

The name and address of person(s) authorized to manage LLC:

Title: MGR
TIFFANY M SIMMONS
5572 SW 111TH LN.
LAKE BUTLER, FL. 32054

Title: MGR
LEMUEL C SIMMONS
5572 SW 111TH LN.
LAKE BUTLER, FL. 32504

Title: MGR
LEM C SIMMONS II
25577 SW 22ND PLACE
NEWBERRY, FL. 32669

Article V

The effective date for this Limited Liability Company shall be:

12/01/2016

Signature of member or an authorized representative

Electronic Signature: LEMUEL SIMMONS

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.