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SECRETARY OF STATE
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12-13

COVER LETTER

	gistration Section vision of Corporations		
	SANTA ROSA LAND COMPAN	Y LLC	
SUBJECT:		Limited Liabili	ty Company
The enclose	d Articles of Organization and fee(s)	are submitted	for filing.
Please retur	nall correspondence concerning this	matter to the fe	ollowing:
	WHITNEY MALONEY		
•		Name of	Person
	SANTA ROSA LAND COMPANY		
		Firm/Co	mpany
	231 SOMERSET BRIDGE RD #14	06	
•		Addre	ess
	SANTA ROSA BEACH, FL 32459		
v	hitney@theppg,net	City/State and	·
-		ed for future a	nnual report notification)
For further in	formation concerning this matter, ple	ase call:	
,	VHITNEY MALONEY	678	358-3946
_	Name of Person	Area Code	Daytime Telephone Number
Enclosed is	a check for the following amount:		
\$125.00 Fil	ng Fee \$130.00 Filing Fee & Certificate of Status	LCertifie	Sign of Filing Fee & Sign of Copy Sign of Status & Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	1 1 •	Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is	s:		
SANTA ROSA LAND COMPAN	NY LLC		
(Must end with the word	ls "Limited Lia	bility Con	npany, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the	principal office	of the Li	mited Liability Company is:
Principal Office Ado	dress:		Mailing Address:
231 SOMERSET BRIDGE RD #1	1406		231 SOMERSET BRIDGE RD #1406
SANTA ROSA BEACH, FL 3245	59	-	SANTA ROSA BEACH, FL 32459
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve another business entity with an active Florida The name and the Florida street address of the WHITNEY	as its own Reg registration.) registered age Y MALONEY	istered A	
	ERSET BRIDG		
Florida str	eet address (P.	O. Box <u>N</u>	OT acceptable)
SANTA R	OSA BEACH	FL	32459
•	City	State	Zip
place designated in this certificate, I hereby acce	ept the appoint I statutes relativ y position as re	nent as re ig to the p gistered a	or the above stated limited liability company at the sistered agent and agree to act in this capacity. I roper and complete performance of my duties, and i gent as provided for in Chapter 605, F.S

Page 1 of 2

(CONTINUED)

16 DEC 12 PH 1: 20 SECRETARY OF STATE

	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	
ИGR	WHITNEY MALONEY
	231 SOMERSET BRIDGE RD #1406
	SANTA ROSA BEACH, FL 32459
	· · · · · · · · · · · · · · · · · · ·
V: Effective date, if other than the date tive date is listed, the date must be sp	e of filing: (OPTIONAL) secific and cannot be more than five business days prior to or 90 d
tive date is listed, the date must be sp filing.)	pecific and cannot be more than five business days prior to or 90 d meet the applicable statutory filing requirements, this date will not be
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