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(Addı	ess)	
(Addr	(200)	
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		,
(City/	State/Zip/Phone	÷#)
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PICK-UP	☐ WAIT	MAIL
(Busi	iness Entity Nam	ne)
(= 110)		,
(Doci	ument Number)	
Certified Copies	Certificates	of Status
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Special Instructions to Fi	lling Officer:	
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SECRE LARY OF STATE
TALL AHASSEE FLORID.

11- 4/75/11

## **COVER LETTER**

	ew Filing Section vision of Corporations		
SUBJECT	676 Bridal Ave - Jacksonville, l	LLC	
SUBJECT	Name of Limited Liability Company		
The enclose	ed Articles of Organization and fed	e(s) are submitted for filing.	
Please retur	n all correspondence concerning t	his matter to the following:	
	ESRA OF FLORIDA, LLC		
		Name of Person	
	FRANCK BEAUGENDRE		
		Firm/Company	
	P.O Box 8099		
		Address	
	Tampa, FL, 33713		
	franck@fareic.com	City/State and Zip Code	
-	<del> </del>	e used for future annual report notification)	
For further in	nformation concerning this matter,	please call:	
	Tiffany	813 616-6000 +103	
	Name of Person	Area Code Daytime Telephone Number	
Enclosed is	a check for the following amount	:	
\$125.00 Fi		e & \$155.00 Filing Fee & \$160.00 Filing Fee,	
	Mailing Address  New Filing Section  Division of Corporations P.O. Box 6327	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

	iability Company, '	Bibion, or inco.,	
ess of the principal of	fice of the Limited	Liability Company is:	
Office Address:		Mailing Addre	e <u>ss</u> :
	PO B	Rox 8099	
3			
Registered Office, & nnot serve as its own l ve Florida registration	Registered Agent. Y	nt's Signature: You must designate an indi	ividual or
nnot serve as its own investigation of the registered	Registered Agent. Y		SEC TANL
nnot serve as its own live Florida registration	Registered Agent. Yn.) agent are: NDRE		SEC TANL
nnot serve as its own investigation of the registered	Registered Agent. Y		ividual or SECKE JARY (
nnot serve as its own live Florida registration tress of the registered FRANCK BEAUGE	Registered Agent. Yn.) agent are: NDRE Name	You must designate an indi	SEC TANL
nnot serve as its own live Florida registration tress of the registered	Registered Agent. Yn.) agent are: NDRE Name	You must designate an indi	SEC TANL
nnot serve as its own live Florida registration tress of the registered FRANCK BEAUGE	Registered Agent. Yn.) agent are: NDRE Name	You must designate an indi	17 JPR 24 PH SECHETARY OF TALLAHASSEE F
)	office Address:	Office Address:	PO Box 8099

(CONTINUED)

Registered igent's Signature (REQUIRED)

HARAGER A.I. LAG. 1	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager	ESDA OF ELODIDA LLC	
MGR	ESRA OF FLORIDA, LLC 3495 5th Ave N	
	St. Petersburg, FL 33713	
	St. Petersburg, PL 33713	
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(Use attachment if necessary)		n wa
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CLE V: Effective date, if other than the date of filing ffective date is listed, the date must be specific at e of filing.)  If the date inserted in this block does not meet the cument's effective date on the Department of State CLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a number	and cannot be more than five business days prior to or 90 applicable statutory filing requirements, this date will no	ot be list

Filing Fees:

Typed or printed name of signee

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

FRANCK BEAUGENDRE

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)