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CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 8947921 7384056

AUTHORIZATION : *[Signature]*

COST LIMIT : \$ 125.00

ORDER DATE : November 2, 2017

ORDER TIME : 12:01 PM

ORDER NO. : 894792-005

CUSTOMER NO: 7384056

DOMESTIC FILING

NAME: ELEVEN ATLANTIC CHARITIES, LLC

EFFECTIVE DATE:

\_\_\_\_ ARTICLES OF INCORPORATION  
\_\_\_\_ CERTIFICATE OF LIMITED PARTNERSHIP  
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX PLAIN STAMPED COPY  
\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner - EXT.

EXAMINER'S INITIALS: \_\_\_\_\_

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**ARTICLES OF ORGANIZATION  
FOR  
LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

**ELEVEN ATLANTIC CHARITIES, LLC**

**ARTICLE II - Duration:**

The LLC will have a perpetual duration.

**ARTICLE III - Address:**

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

**Principal Office Address:**

442 Third Street  
Neptune Beach, Florida 32266

**Mailing Address:**

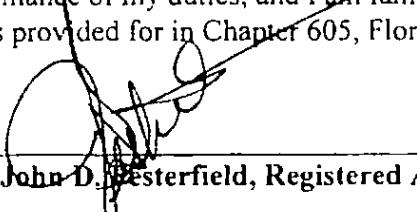
442 Third Street  
Neptune Beach, Florida 32266

**ARTICLE IV - Registered Agent, Registered office & Registered Agent's Signature:**

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

**John D. Pesterfield  
442 Third Street  
Neptune Beach, Florida 32266**

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, Florida Statutes.

  
\_\_\_\_\_  
**John D. Pesterfield, Registered Agent**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
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**ARTICLE V - Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

**Name and Address:**

MGRM

John D. Pesterfield  
2309 Fiddlers Lane  
Atlantic Beach, Florida 32233

MGRM

Paul S. Ross  
4377 Seabreeze Drive  
Jacksonville Beach, Florida 32250

**ARTICLE VI – Effective Date:**

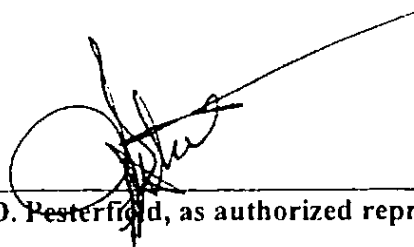
The effective date of the LLC will be the date of filing of these articles.

**ARTICLE VII – Admission of New Members:**

New members may be admitted pursuant to terms of the Operating Agreement.

**ARTICLE VIII – Purpose:**

The LLC is formed for any lawful purpose(s) under state and federal law.



**John D. Pesterfield, as authorized representative**

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any 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.)

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