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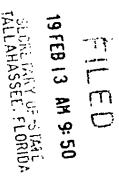
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: SM-Basswood, LLC Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Nicole Jackson Name of Person
SMG Property Hanagement Firm/Company
9027 Town Center Parkway Address
City/State and Zip Code OiCole a Smypm. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee & S130.00 Filing Fee & Certificate of Status Certified Copy (additional 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 P.O. Box 6327 Tallahassee, FL 32314

New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
SM-Basswood, LLC	-
(Must contain the words "Limited Liability Co	mpany, "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:
Gozza Town Center Pkwy Lakewood Rarch, FL 34202	Goot Town Center Pkuy Lalawod lanch, Fl 34202
ARTICLE III - Registered Agent, Registered Office, & Register (The Limited Liability Company cannot serve as its own Registered another business entity with an active Florida registration.)	
The name and the Florida street address of the registered agent are:	19 1 FALL
0 - 1	rison, Esq.
1206 Handter Florida street address (P.O. Box	NOT acceptable)
Bradenton Fo	NOT acceptable) Zip Zip
laving been named as registered agent and to accept service of proces lace designated in this certificate. I hereby accept the appointment as wither agree to comply with the provisions of all statutes relating to the familiar with and accept the obligations of my position as registered.	s for the above stated limited liability company at the registered agent and agree to act in this capacity. I proper and complete performance of my duties, and I

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title: "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager	SH-Basswood Hanagers, LIC 9027 Town Center Pluy Lakewood Ranch, PL 341202 AND SEE SO DRIED TO SE SO DRIED TO SEE SO DRIED TO SE DRIED TO SEE SO DRIED TO SEE SO DRIED TO SEE SO DRIED TO SE DRIED TO SEE SO DRIED TO SE DRIED TO SE DRIED TO SE DRIED	
(If an effective date is listed, the date must be speci the date of filing.)	filing:	
This document is executed I am aware that any false in	ber or an authorized representative of a member. in accordance with section 605.0203 (1) (b), Florida Statutes. iformation submitted in a document to the Department of State	

S. Newsor

Typed or printed name of signee

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)