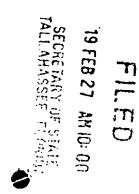
119000051173

(Requestor's Name)
(Address)
(Áddress)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

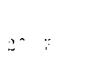
Office Use Only



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TSCHROEDER

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500
ACCOUNT NO. : I2000000195
REFERENCE : 647874 7384056
AUTHORIZATION: Spelle Ran
COST LIMIT : \$ 185.00
ORDER DATE : February 27, 2019
ORDER TIME : 11:21 AM
ORDER NO. : 647874-005
CUSTOMER NO: 7384056
DOMESTIC FILING
NAME: COMBS CAPITAL MANAGEMENT, LLC
EFFECTIVE DATE:
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY

EXAMINER'S INITIALS:

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner - EXT.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

COMBS CAPITAL MANAGEMENT, 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 3RD Street

Neptune Beach, Florida 32266

Mailing Address:

442 3rd Street

Neptune Beach, Florida 32266

F I L E L)

ARTICLE IV - Registered Agent, Registered office & Registered Agent's Signature: The name and the Florida street address of the registered agent is:

John F. Combs

442 3rd 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 F. Combs, Registered Agent

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:

MGR

John F. Combs

13613 Bromley Point Drive Jacksonville, Florida 32225

AMBR

Susanna M. Klein

13613 Bromley Point Drive Jacksonville, Florida 32225

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 F. Combs, 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.)