

L19000141725

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

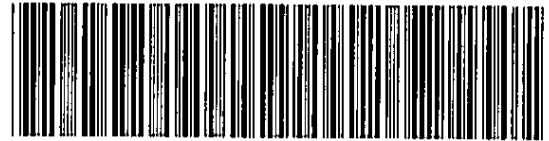
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300329408243

05/23/19--01020--008 **160.00

FILED
19 MAY 23 PM 2:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N CULLIGAN

JUN 5 2019

Patti B. Crosby, Paralegal
Direct Dial: (678) 336-7296
Email: pcrosby@taylorenghish.com

May 22, 2019

VIA FED EX

Department of State of Florida
Division of Corporations
Clifton Building
2661 Executive Center Cir.
Tallahassee, FL 32301

Re: Articles of Organization Filings

Dear Sir or Madam:

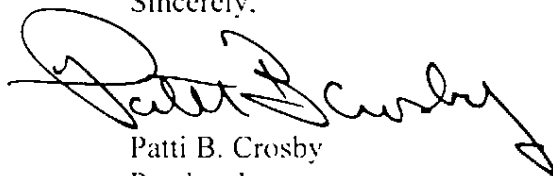
I am enclosing with this letter the following originals:

1. Articles of Organization of 4240 S. Semoran Boulevard, LLC; and
2. Articles of Organization of Dunnellon Square Mobile Home Village, LLC.

Also enclosed are our firm's checks in the amounts of \$160 each in payment of the filing fees for the above.

Please return the filed Articles as soon as possible to the undersigned.

Sincerely,



Patti B. Crosby
Paralegal

/pbc

Enclosures

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: Dunnellon Square Mobile Home Village, 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:

Patti B. Crosby, Paralegal

Name of Person

Taylor English Duma LLP

Firm/Company

1600 Parkwood Circle, Suite 200

Address

Atlanta, Georgia 30339

City/State and Zip Code

tchorey@taylorenghish.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

<u>Patti Crosby</u>	at (<u>678</u>)	<u>336-7296</u>
Name of Person	Area Code	Daytime Telephone Number

Enclosed is a check for the following amount:

<input type="checkbox"/> \$125.00 Filing Fee	<input type="checkbox"/> \$130.00 Filing Fee & Certificate of Status	<input type="checkbox"/> \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	<input checked="" type="checkbox"/> \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
--	---	---	--

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

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

ARTICLES OF ORGANIZATION
OF

DUNNELLON SQUARE MOBILE HOME VILLAGE, LLC

FILED
19 MAY 23 PM 2:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Article 1. Name. The name of the limited liability company is Dunnellon Square Mobile Home Village, LLC (the "Company").

Article 2. Management. Management of the Company is vested in one or more managers elected from time to time. The authority and powers of such manager(s) shall be subject to the terms, conditions and limitations set forth in any applicable Operating Agreement of the Company, as amended from time to time, including, without limitation, the requisite approval(s) required to authorize any action which might be taken by any manager in order to make such action binding upon the Company and enforceable by any applicable designated person or entity.

Article 3. Effective Time. These Articles of Organization shall be effective on the date of filing of these Articles of Organization with the Secretary of State of Florida.

Article 4. Registered Agent and Office; Registered Agent's Signature. The address of the initial registered office of the Company shall be 1200 South Pine Island Road, Plantation, Florida 33324 (Broward County). The initial registered agent of the Company at such address shall be CT Corporation System.

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 the 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, F.S.

CT Corporation System

By: Natalie Leiba-Paul
Name: Natalie Leiba-Paul
Title: Assistant Secretary

Article 5. Company Address. The mailing address of the initial principal office of the Company shall be as follows:

3246 Lost Mill Trce
Marietta, GA 30062-7622

Article 6. Authorized Representative. The name and address of the authorized representative are:

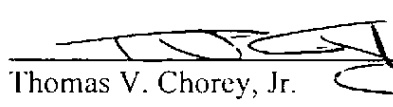
Thomas V. Chorey, Jr.
Taylor English Duma LLP
Suite 400
1600 Parkwood Circle, SE
Atlanta, GA 30339-2119

Article 7. Purpose. The purpose of the Company is pecuniary gain and profit; to engage in the acquisition, retention, management and disposition of real and personal property of all types and descriptions, all in accordance with applicable laws; to make and carry out contracts of every kind that may be necessary or conducive to the accomplishment of the purposes of the Company; to engage in any form or type of business for any lawful purpose or purposes not specifically prohibited to limited liability companies under the laws of the State of Florida; and to have all the rights, powers, privileges and immunities which are now or hereafter may be allowed to a limited liability company under the laws of the State of Florida.

Article 8. Managers. The initial Board of Managers of the Company shall consist of the following person:

Mr. John S. Chastain
3246 Lost Mill Tree
Marietta, GA 30062-7622

IN WITNESS WHEREOF, the undersigned authorized representative executes these Articles of Organization as of May 21, 2019.


Thomas V. Chorey, Jr.
Authorized Representative

FILED
19 MAY 23 PM 2:40
TALLAHASSEE, FLORIDA