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Florida Department of State  
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To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : ROBINSON COLLINS, P.L.  
Account Number : 120140000087  
Phone : (904)483-3857  
Fax Number : (904)483-3853

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: kris@robinsoncollins.com

FLORIDA LIMITED LIABILITY CO.  
1048 Fruit Cove, LLC

Certificate of Status	0
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ARTICLES OF ORGANIZATION  
OF  
1040 FRUIT COVE, LLC

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Pursuant to the Florida Revised Limited Liability Company Act, Chap. 605, Florida Statutes, as amended from time to time (the "Act"), the following are adopted as the Articles of Organization of the limited liability company organized hereby:

ARTICLE I - NAME

The name of the limited liability company (the "Company") shall be 1048 Fruit Cove, LLC.

ARTICLE II - ADDRESS

The mailing address of the company will be 1040 Fruit Cove Road, St. Johns, Florida 32259 and the street address of the principal office of the Company shall be 1040 Fruit Cove Road, St. Johns, Florida 32259.

ARTICLE III - REGISTERED AGENT

The initial registered office of the Company shall be 1604 Stockton Street, Jacksonville, Florida 32204, and its initial registered agent at such office shall be Robinson Collins, P.L.

ARTICLE IV - ADDITIONAL MEMBERS


Additional Members (as the term "Member" is defined in § 605.0102(40) of the Act) may be admitted at such times and on such terms and conditions as provided in the Operating Agreement.

ARTICLE V - MANAGEMENT OF THE COMPANY

The Company will be a manager-managed limited liability company, to be managed in accordance with and subject to the requirements of the Act and the Operating Agreement of the Company. The name and address of the initial manager of the Company is as follows:

<u>Manager</u>	<u>Address</u>
C. Coleman Young, Jr.	1040 Fruit Cove Road St. Johns, Florida 32259

Dated this 3<sup>rd</sup> day of July, 2019.

  
\_\_\_\_\_  
Kristopher D. Robinson,  
Authorized Representative

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**CERTIFICATE DESIGNATING REGISTERED OFFICE AND REGISTERED  
AGENT FOR THE SERVICE OF PROCESS WITHIN FLORIDA**

In compliance with Chapter 605, Florida Statutes, as amended from time to time (the "Act"), the following is submitted:

1048 Fruit Cove, LLC, desiring to organize or qualify under the laws of the State of Florida as a limited liability company pursuant to the Act, hereby designates Robinson Collins, P.L. as its registered agent to accept service of process within the State of Florida and the address of its registered office shall be 1604 Stockton Street, Jacksonville, Florida 32204.

DATED this 3<sup>rd</sup> day of July, 2019.

  
\_\_\_\_\_  
Kristopher D. Robinson,  
Authorized Representative

Having been named as registered agent to accept service of process for the above-stated limited liability company, at the place designated in this certificate, the undersigned hereby agrees to accept the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and the undersigned is familiar with and accepts the obligations of its position as registered agent.

DATED this 3<sup>rd</sup> day of July, 2019.

ROBINSON COLLINS, P.L.

  
\_\_\_\_\_  
Kristopher D. Robinson, Manager

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