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# **COVER LETTER**

	New Filing Section Division of Corporations	
SUBJEC	1104 Green Tree, LLC	
no Bone		ame of Limited Liability Company
The enclo	osed Articles of Organization an	d fee(s) are submitted for filing.
Please ret	um all correspondence concern	ing this matter to the following:
	Anita Brown	
		Name of Person
		Firm/Company
	3626 Gettysburg Ct	Типисопрану
		Address
	Tallahassee, FL 32308	
	anitasummersbrown@kw.com	City/State and Zip Code
		to be used for future annual report notification)
For further	information concerning this ma	tter, please call:
	Anita Brown	678 630-3150 at ()
	Name of Person	Area Code Daytime Telephone Number
Enclosed	is a check for the following amo	ount:
\$125.00 F	Filing Fee \$130.00 Filing Certificate of	
	Mailing Address	Street Address
	New Filing Section Division of Corporation	New Filing Section Division of Corporations
	P.O. Box 6327	Clifton Building
	Tallahassee, Fl. 32314	2661 Executive Center Circle

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

1104 Green Tree, LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

### **ARTICLE II - Address:**

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

		P	rin	cip	al	Office	Address	:
--	--	---	-----	-----	----	--------	---------	---

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3626 Gettysburg Ct	3626 Gettysburg Ct
Tallahassee, FL 32308	Tallahassee, FL 32308

# ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

	Name	-
3626 Gettysburg Ct		_
Florida street addres	ss (P.O. Box <u>NOT</u> ac	cceptable)
. To rida ga cer adare.	(11011111111111111111111111111111111111	'
Tallahassee	FL	32308

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, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

AFORETARY OF STATE

" A B	e: //BR" = Authorized	l Mamhar	Name and Address:	
	GR" = Manager	i Michioci		
MG			Anita Brown	
	•	-	3626 Gettysburg Ct	
			Tallahassee, FL 32308	
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////	e attachment if nece	essary)		
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as

Anita Brown

Typed or printed name of signee

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State

## Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

constitutes a third degree felony/as provided for in \$.817.155, F.S.

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)