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1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : 12000000195 REFERENCE : AUTHORIZATION : COST LIMIT : \$ 130.00 ORDER DATE: May 6, 2021 ORDER TIME: 12:17 PM ORDER NO. : 796986-005 CUSTOMER NO: 7991505 DOMESTIC FILING NAME: DARDEN HILL OAKS LLC EFFECTIVE DATE: ARTICLES OF INCORPORATION _ CERTIFICATE OF LIMITED PARTNERSHIP XX____ ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY ____ PLAIN STAMPED COPY _ CERTIFICATE OF GOOD STANDING CONTACT PERSON: Eyliena Baker - EXT.

EXAMINER'S INITIALS:

CORPORATION SERVICE COMPANY

COVER LETTER

TO:	New Filing Se Division of Co					(4.7)	
CUDII		ill Oaks LLC				es.	
SUBJE	SUBJECT: Name of Limited Liability Company						
The en	closed Articles of	f Organization and fee(s) a	re submitted :	for filing.			
Please	return all corresp	ondence concerning this m	natter to the fo	llowing:			
	John E. Mo	ore, III, Esq.					
			Name of I	Person			
	Dean Mead	Minton & Moore					
	Firm/Company						
	3240 Cardinal Drive, Suite 200						
Address							
	Vero Beach	, FL 32963					
		(City/State and	Zip Code			
	jmoore@dea						
		E-mail address: (to be used	l for future ar	inual report notificati	ion)		
For furth	er information co	oncerning this matter, pleas	e call:				
	John E. Moo		772	234-8344			
	Nan	· · · · · · · · · · · · · · · · · · ·	Area Code	Daytime Telephon	e Number		
Enclose	ed is a check for t	the following amount:					
□\$125	5.00 Filing Fee	■\$130.00 Filing Fee & Certificate of Status	Certific	.00 Filing Fee & d Copy copy is enclosed)	☐\$160.00 Fill Certificate of Certified Copy (additional copy	Status &	
	<u>Mailir</u>	ng Address		treet Address			
	New Filing Section			lew Filing Section Di			
		on of Corporations Fox 6327		he Centre of Tallahe 415 N. Monroe Stree			
	Tallahassec, FL 32314			Tallahassee, FL 32303			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name: The name of the Limited Liability Company is: Darden Hill Oaks 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: Principal Office Address: Mailing Address: 3240 Cardinal Drive, Suite 200 3240 Cardinal Drive, Suite 200 Vero Beach, FL 32963 Vero Beach, FL 32963 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: Dean Mead Services, LLC Name 420 S. Orange Avenue, Suite 700 Florida street address (P.O. Box NOT acceptable)

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.,

Orlando

City

DEAN MEAD SERVICES, LLC

By: Dean, Mead, Egerton, Bloodworth, Capouano & Bozarth, P.A., sale member

gistered Agent's Signature (REQUIRED)

fint Name: John E. Moore, III, Vice President

(CONTINUED)

Florida

State

32801

Zip

Title: "AMBR" - Authorized Member "MGR" - Manager	Name and Address:	
MGR	JOHN E. MOORE, III 3240 Cardinal Drive, Suite 200 Vero Beach, FL 32963	- - -
		- - -
		-
		<u>-</u> -
(Use attachment if necessary)		
(If an effective date is listed, the date must be sp the date of filing.)	c of filing:	
ARTICLE VI: Other provisions, if any.		
REQUIRED SIGNATURE	M	
This document is executed am aware that any fals	tember or an authorized representative of a member, and in accordance with section 605,0203 (1) (b), Florida Statutes, in information submitted in a document to the Department of State refelony as provided for in s.817.155, F.S.	•
JOHN F. MOOF	RF, 111, as Manager 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)