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(F	Requestor's Name)				
(Address)					
(A	ddress)				
(0	City/State/Zip/Phone #)				
PICK-UP	WAIT MAIL				
(E	Business Entity Name)				
(E	Document Number)				
Certified Copies	Certificates of Status				
Special Instructions t	o Filing Officer:				

Office Use Only



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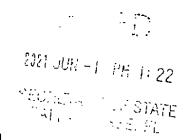
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ALLAHASSEE, rilo

COVER LETTER

TO: New Filing Section

⊬ Di	vision of Corporations						
SUBJECT		VER KEY REAL	TY, LLC				
Name of Limited Liability Company							
The enclose	ed Articles of Organization and fe	e(s) are submitted	for filing.				
Please retu	rn all correspondence concerning	this matter to the	following:				
	STACY SMALL						
		Name of	Person				
	SMITH THOMPSON SHAW						
	Firm/Company						
	3520 THOMASVILLE ROAD - 4TH FLOOR						
	Address						
	TALLAHASSEE, FL 32309						
		City/State ar	d Zip Code				
-	E-mail address: (to b	e used for future	annual report notificat	ion)			
For further in	nformation concerning this matter	, please call:					
	STACY SMALL	850 at (893-4105				
	Name of Person			ne Number			
Enclosed is	a check for the following amount	:					
	Filing Fee S130.00 Filing Certificate of Sta	Fee & □\$15 tus Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
	Mailing Address		Street Address				
	New Filing Section		New Filing Section Division				
Division of Corporations P.O. Box 6327			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810				
	Tallahassee, FL 32314 Tallahassee, FL 32303						
1 allallassee, FL 32314			1 allakia5500, PL 32303				



ARTICLES OF ORGANIZATION OF CLOVER KEY REALTY, LLC

The undersigned, pursuant to the provisions of Chapter 605 of the Florida Statutes (the "Florida Revised Limited Liability Company Act"), for the purpose of forming a Limited Liability Company under the laws of the State of Florida do set forth the following:

1. <u>NAME</u>.

The name of the Limited Liability Company is CLOVER KEY REALTY, LLC (hereinafter referred to as the "Company").

2. PERIOD OF DURATION.

The period of duration of the Company shall be perpetual, unless it is dissolved as provided in the Florida Limited Liability Act or the written Operating Agreement to be executed by all of the Members of the Company.

3. PURPOSE.

To engage in any and all other businesses and activities permitted by the laws of the State of Florida. The Company shall have all of the powers vested in a limited liability company organized and existing by virtue of such laws.

4. MAILING ADDRESS OF BUSINESS.

The mailing address of the business in Florida for the Company is 3130 Baringer Hill Drive, Tallahassee, Florida 32311. Such address may be changed from time to time as provided in the Operating Agreement.

5. ADDRESS OF PLACE OF BUSINESS.

The address of the place of business is **3130 Baringer Hill Drive**, **Tallahassee**, **Florida 32311**. Such address may be changed from time to time as provided in the Operating Agreement.

6. REGISTERED AGENT.

The initial registered agent in Florida for the Company is: Mandy O'Callaghan, 3130 Baringer Hill Drive, Tallahassee, Florida 32311.

7. MANAGEMENT.

The name and address of the person authorized to manage and control the Limited Liability Company are as follows:

Mandy O'Callaghan 3130 Baringer Hill Drive Tallahassee, Florida 32311

EXECUTED at Tallahassee, Leon County, Florida this /S/h day of May, 2021.

Mandy O'Callaghan /

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT WITH WHOM PROCESS MAY BE SERVED.

Pursuant to the provisions of Section 605 Florida Statutes, the undersigned Limited Liability Company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

- 1. The name of the limited liability company is CLOVER KEY REALTY, LLC.
- 2. The name of the registered agent and office is: Mandy O'Callaghan, 3130 Baringer Hill Drive, Tallahassee, Florida 32311.

ACKNOWLEDGEMENT

Having been named to accept service of process for the above limited liability company, at the place designated in this certificate, I hereby accept to act in this capacity and agree to comply with the provision of said Act relative to being available at said location.

Mandy O'Callaghan