

L21000381756

Jessie

11:23:53 am 09-25-2021

1/3

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H21000318740 3)))



H210003187403ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : EDWARDS COHEN
Account Number : I20080000011
Phone : (904)633-7979
Fax Number : (904)633-9026

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

Email Address: dedwards@edcolaw.com

FLORIDA LIMITED LIABILITY CO.

Three Amigos Citation II, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

2021-09-25 PM 12:32
2021-09-25 AM 10:12

**ARTICLES OF ORGANIZATION
OF
THREE AMIGOS CITATION II, LLC**

Pursuant to the Florida Revised Limited Liability Company Act, Chapter 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 this limited liability company (the "Company") is:

THREE AMIGOS CITATION II, LLC

**ARTICLE II
ADDRESS**

The street address of the principal office of the Company is:

785 AMELIA EARHART DRIVE
JACKSONVILLE, FLORIDA 32225

The mailing address of the Company is:

785 AMELIA EARHART DRIVE
JACKSONVILLE, FLORIDA 32225

**ARTICLE III
REGISTERED AGENT**

The name and street address of the initial registered agent of the Company are:

DAVID J. EDWARDS, ESQ.
200 W. FORSYTH STREET, SUITE 1300
JACKSONVILLE, FLORIDA 32202

Having been named as registered agent and to accept service of process for the 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 the Act.



DAVID J. EDWARDS

2021 AUG 25 PM 10:12

**ARTICLE IV
MANAGEMENT**

The name and address of person(s) authorized to manage the Company is:

TITLE: AMBR

SPENCE J. EDWARDS
785 AMELIA EARHART DRIVE
JACKSONVILLE, FLORIDA 32225

ROBERT FLECKENSTEIN
2604 TACITO TRAIL
JACKSONVILLE, FLORIDA 32223

STOKES LAND VENTURES LLC
25655 MARSH LANDING PARKWAY
PONTE VEDRA BEACH, FLORIDA 32082

2021. 8. 25 AM 10:12

The undersigned, an authorized representative of the Company, has executed these Articles of Organization on behalf of the Company in accordance with Section 605.0203 of the Act.

Dated: 8/25/21


SPENCE J. EDWARDS