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12/10/21

NAME: 8 WILLOUGHBY PLACE, LLC

TYPE OF FILING: ARTICLES

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AUTHORIZATION: ABBIE/PAUL HODGE

ARTICLES OF ORGANIZATION FOR FLORIDALIMITED LIABILITY COMPANY

٠	DTI	E I	 Name	٠.

The name of the Limited Liability Company is:

SERVICED IC ANID: 37

8 Willoughby Place, LLC

(Must conatin 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:

<u>Principal</u>	Office Address:		Mailing Address:
19 River Chase Way		19 R	iver Chase Way
Ormond Beach, FL 32	2174	<u>Orm</u>	ond Beach, FL 32174
The Limited Liability Company can			•
mother business entity with an act	ive Florida registration. dress of the registered a	gent are:	·
Inother business entity with an act	ive Florida registration. dress of the registered a Bra) gent are: d G. Leslie	
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mother business entity with an act	ive Florida registration. dress of the registered a Bra ?) gent are; d G. Lestie Name ver Chase Way	

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.

Brad Leslie
Registered Agent's Signature (REQUIRED)

(CONTINUED)

\$ 30.00 Certified Copy (Optional)\$ 5.00 Certificate of Status (Optional)

ARTICLE IV-

"AMBR" =		Name and Address:
	Authorized Member	
"MGR" = N	Manager	
3.4	CD	Prod C. Loulia
<u></u>	<u>GR</u>	Brad G. Leslie 19 River Chase Way Ormond Beach, FL 32174
		Ormond Reach, FL 32174
-		
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EV: Effect	ment if necessary) tive date, if other than the listed, the date must	he date of filing:
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