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COVER LETTER

New Filing Section

TO:

Division of Corporations
Adams Retreat Two, LLC SUBJECT:
Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Carolyn L. Adams
Name of Person
Firm/Company
2929 Lewiswood Lane
Address
Tallahassee, Florida 32305-1800
City/State and Zip Code adams-retreats@centurylink.net
E-mail address: (to be used for future annual report notification)
or further information concerning this matter, please call:
Sally Van Brunt 850 523-9300at ()
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□\$125.00 Filing Fee □\$130.00 Filing Fee & □\$155.00 Filing Fee & □\$160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) □\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Street Address

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION

OF

ADAMS RETREAT TWO, LLC

Article I. Name

The name of this limited liability company is **Adams Retreat Two, LLC**, hereinafter also referred to as "the Company."

Article II. Address of Principal Office

The mailing address and street address of the principal office of the Company is 2929 Lewiswood Lane, Tallahassee, Florida 32305-1800.

Article III. Initial Registered Agent and Address

The name of the initial registered agent of the Company is Carolyn L. Adams, whose street address is 2929 Lewiswood Lane, Tallahassee, Florida 32305-1800.

Article IV. Management and Authorized Members

The Company will be managed by its members. The name and address of the persons authorized to manage and control the Company who are Authorized Members are:

Floyd E. Adams 2929 Lewiswood Lane Tallahassee, Florida 32305-1800

Carolyn L. Adams 2929 Lewiswood Lane Tallahassee, Florida 32305-1800

This document is executed in accordance with Section 605.0203(1)(b) of the Florida Statutes and Section 605.0205(3) of the Florida Statutes. I am aware that any false statement submitted in a document to the Department of State constitutes a third degree felony as provided for in Section 817.155 of the Florida Statutes.

Signed at Tallahassee, Leon County, Florida, on June 29, 2022.

Carolyn L. Adams, Authorized Member

Articles Of Organization Adams Retreat Two, LLC Page 1 of 2 pages

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Having been named as registered agent and to accept service of process for Adams Retreat Two, LLC, a Florida limited liability company, at 2929 Lewiswood Lane. Tallahassee, Florida 32305-1800. 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 of the Florida Statutes.

This document is executed in accordance with Section 605.0203(1)(b) of the Florida Statutes and Section 605.0205(3) of the Florida Statutes. I am aware that any false statement submitted in a document to the Department of State constitutes a third degree felony as provided for in Section 817.155 of the Florida Statutes.

Signed at Tallahassee, Leon County. Florida, on June 29, 2022.

Carolyn L. Adams, Registered Agent

arolyn L. adams

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Articles Of Organization Adams Retreat Two, LLC Page 2 of 2 pages