

L23000270655

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.

((H23000202595 3)))



H230002025953ABC

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 : SODL & INGRAM PLLC
Account Number : I20190000071
Phone : (904)257-5777
Fax Number : (904)347-2738

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

Email Address: _____

RECEIVED

2023 JUN -5 PM 3:34

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
ELECTRONIC FILING SERVICES

**FLORIDA LIMITED LIABILITY CO.
ABILITY HARLOW, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

SECRETARY OF STATE
TALLAHASSEE, FL

2023 JUN -5 PM 2:26

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

(((H23000202595 3)))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Ability Harlow, 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:3740 Beach BoulevardSuite 304Jacksonville, FL 32207**Mailing Address:**3740 Beach BoulevardSuite 304Jacksonville, FL 32207**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:

Shannon L. Nazworth

Name

3740 Beach Boulevard, Suite 304Florida street address (P.O. Box **NOT** acceptable)JacksonvilleFL32207

City

State

Zip

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..

Shannon Nazworth

Shannon Nazworth (Jun 7, 2023 14:45 EDT)

Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED
 2023 JUN -5 PM 2:26
 SECRETARY OF STATE
 TALLAHASSEE, FL

(((H23000202595 3)))

((H23000202595 3)))

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

Name and Address:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Ability Housing, Inc
3740 Beach Boulevard, Suite 304
Jacksonville, FL 32207

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Shannon Nazworth

Shannon Narworth (Jun 7, 2023 14:45 EDT)

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Shannon L. Nazworth

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)

FILED
2023 JUN -5 PM 2:26
SECRETARY OF STATE
TALLAHASSEE, FL

((H23000202595 3)))