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#### FLORIDA LIMITED LIABILITY CO.

Olive Grove Stewardship LLC

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August 6, 2023

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SHUFFIELD LOWMAN

,

SUBJECT: COQUINA LAND BANK LLC

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We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Written approval and clearance of the words BANK, BANC, BANCO, BANQUE, BANKER, BANKING, TRUST COMPANY, SAVINGS AND LOAN ASSOCIATION, SAVINGS BANK or CREDIT UNION, or words of similar import in any context or any manner must be obtained from the Office of Financial Regulation, pursuant to section 655.922(2a), Florida Statutes.

If the proposed name is approved by the Office of Financial Institutions, resubmit the document and the approval letter to the Division of Corporations for filing. The Office of Financial Institutions' phone number is 850-410-9800.

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Carlos E Rico Supervisor New Filing Section FAX Aud. #: H23000271566 Letter Number: 923A00017724

P.O BOX 6327 - Tallahassee, Florida 32314

# ARTICLES OF ORGANIZATION OF OLIVE GROVE STEWARDSHIP LLC

#### A Florida Limited Liability Company

#### ARTICLE I NAME

The name of this limited liability company is Olive Grove Stewardship LLC d/b/a Olive Grove Real Estate, referred to in these Articles of Organization as the "Company,"

## ARTICLE II MAILING AND STREET ADDRESS

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

22 Red Birch Lane Palm Coast, FL 32164

The mailing address of the principal office of the Company is as follows:

22 Red Birch Lane Palm Coast, FL 32164

# ARTICLE III COMMENCEMENT OF COMPANY'S EXISTENCE

In accordance with Section 605.0207. Florida Statutes, the Company's existence shall be deemed to have commenced on the date and at the time the record is filed as evidenced by the Florida Department of State's endorsement of the date and time on the record.

### ARTICLE IV REGISTERED AGENT

The name and Florida street address of the initial Registered Agent are as follows:

Jason A. Davis, Esq. Shuffield, Lowman & Wilson, P.A. 545 West Main Street, Tayares, FL 32778 alion and it

The name and address of each person initially authorized to manage and control the Company, until their successors are appointed, are as follows:

Title	Name and Address	
Manager	Sean Tabone	
	22 Red Birch Lane	
	Palm Coast, FL 32164	

# ARTICLE VI APPLICABLE LAW

The Company is created pursuant to Chapter 605. Florida Statutes, and shall be governed by the laws of the State of Florida.

Jason A. Davis, Esq., as Authorized Representative

# ACCEPTANCE OF DESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of Section 605.0113. Florida Statutes, the undersigned submits the following statement of acceptance of his designation as Registered Agent for the Company:

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 he 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 fuffies. All am familiar with and accept the obligations of my position as Registered Agent as provided for in Chapter 605 of the Florida Statutes.

Jason A. Davis, Esq.