

Florida Department of State

Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : GINN & PATROU, PA

Account Number : I20190000124

Phone : (904)461-3000

Fax Number : (844)730-9828

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

Email Address: cpatrou@ginnpatrou.com

FLORIDA LIMITED LIABILITY CO.

Cedar Brook Lane LLC

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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
JAN 24 2025

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Cedar Brook Lane 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:7198 A1A South
St. Augustine, FL 32080Mailing Address:7198 A1A South
St. Augustine, FL 32080

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:

Ginn & Patrou, PLLC

Name

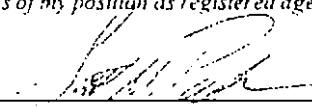
460 A1A Beach BlvdFlorida street address (P.O. Box **NOT** acceptable)St. AugustineFL32080

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..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

