

L950000000 22

FILED

95 JAN 11 11 18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DONALD E. NICHOLS JR

(Requestor's Name)

3530 RHYCE STREET

(Address)

407

COCONA FL 32926 6357236

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

600001380536

-01/13/95--01057--030

***337.50 ***337.50

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. AMERISOUTH HOUSING LC

(Corporation Name)

(Document #)

2.

(Corporation Name)

(Document #)

3.

(Corporation Name)

(Document #)

4.

(Corporation Name)

(Document #)

☒ Walk in

☐ Pick up time

☒ Certified Copy

☐ Mail out

☒ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

1-11-95

Examiner's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED
LIABILITY COMPANY

FILED

95 JAN 11 1995

SECRETARY
TALLAHASSEE

ARTICLE I - Name:

The name of the Limited Liability Company is:

AMERISOUTH HOUSING L.C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

3530 BRYCE STREET
COCOA, FLORIDA 32926

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

UNTIL APRIL 1, 2024

ARTICLE IV - Management:

(check and complete the appropriate statement)

☐ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

☒ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/ are:

DONALD E NICHOLS, JR.
3530 BRYCE STREET
COCOA, FL 32926

NATALIE L. NICHOLS

APT 270

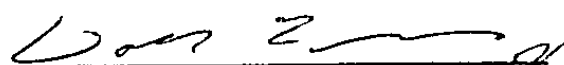
7505 SW 82ND STREET

MIAMI, FL 33143

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of AMERISOUTH
HOUSING L.C. deposes and says:

- 1) the above named limited liability company has at least two members
- 2) the total amount of cash contributed by the member(s) is \$ 100⁰⁰ .
- 3) if any, the agreed value of property other than cash contributed by member(s) is
\$ - 0 - . A description of the property is attached and made a part hereto.
- 4) the total amount of cash or property anticipated to be contributed by member(s) is
\$ 100⁰⁰ . This total includes amounts from 2 and 3 above.


Signature of a member or authorized representative of a member.
(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit
constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: _____

AMEAL SOUTH HOUSING LLC.

2. The name and address of the registered agent and office is:

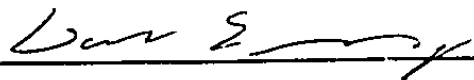
DONALD E. NICHOLS JR.
(Name)

3530 BRYCE STREET
(P.O. BOX not acceptable)

COCOA, FLA 32926
(City/State/Zip)

FILED
95 JAN 11 PM 3:18
TALLAHASSEE
FLORIDA

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.


(Signature)

JAN 11, 1995
(Date)

FILING FEE: \$ 35 for Designation of Registered Agent