TRANSMITTIAL LETTER FOR FLORIDA LIMITED LIABILITY COMPANY Department of State

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT:		Florence Manager (Proposed limited liability con	ment LC npany name - must include sui	lix)			
				600(-01/10/ ****34	001683696 /9601033010 46.25 ****346.25		
Enclosed is an	original a	and one (1) copy of the a	rticles of organization as	nd a check f	or:		
\$285.00 Filing Fee & Registere Agent design	d	\$293.75 Filing Fee, Registered Agent Designation & Certificate	\$337.50 Filing Fee, Registered Agent Designation & Certified Copy	Designat	ng Fee, . gistered Agent signation, rtified Copy &		
. FROM:			Miller, Smith & Col	es, P.L.L.	c.		
		Name (Prin	ted or typed)				
	10 LSB			75 L T	96 .		
	Lexing	ton, North Carolina City, Sta	27292 te & Zip	Massee, Florida	FILED JMI -2 PII 8: 25 EIARY OF STATE		
	704 24	Daytime Telep	phone number		\sim		

NOTE: Please provide the original and one copy of the articles.

LIMITED LIABILITY COMPANY ARTICLES OF ORGANIZATION OF FLORENCE MANAGEMENT LC

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Pursuant to the Florida Limited Liability Company Act, Chapter 608 of the Florida Statutes, the undersigned does hereby submit these articles of Organization for the purpose of forming a Limited Liability Company.

ARTICLE I - Name:

The name of the Limited Liability Company is:

Florence Management LC

ARTICLE II - Address:

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

1840 Red Bank Road North Palm Beach, Florida 33408

ARTICLE III - Duration:

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

January 1, 2050

ARTICLE IV - Management:

The Limited Liability Company is to be managed by the members and the names and addresses of the managing members are:

William L. Florence, III 1840 Red Bank Road North Palm Beach, Florida 33408

Margaret B. Florence 1840 Red Bank Road North Palm Beach, Florida 33408

ARTICLE V

These articles shall be effective upon filing.

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of	
Florence Management LC	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	\$ <u>1,000.00</u> .
3) if any, the agreed value of property other than cash contributed by member(s) is A description of the property is attached and made a part hereto.	\$N/A
4) the amount of cash or property anticipated to be contributed by member(s) is	. s
5) the total amount of 2, 3, and 4 is	\$ 1,000.00

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, FLORI THE UNDERSIGNED LIMITED LIABILITY COMPANY ORGANIZED UNDER	DV 31		ES,
THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN	DESIG	LAWS NAT	OF NG
THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLO	DESIG ORIDA.	ילט ולאטיזי	шчС
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1. The name of the limited liability company is: Florence Management LC	1255	-2	
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		Б.	
William L. Florence, III		Ε.	
William L. Florence, III (NAME) 1840 Red Bark Road			
William L. Florence, III (NAME)			
(NAME) 1840 Red Bark Road (P.O. Box NOT ACCEPTABLE) North Palm Beach, Florida 33408			
William L. Florence, III (NAME) 1840 Red Bark Road (P.O. Box NOT ACCEPTABLE)			

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) ZI DEC 95 (DATE)