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

Waide Development Southeast LLC

- ☐ Walk In
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☒ Certified Copy

☐ Certificate of Status

☐ Certificate of Good Standing

☐ ARTICLES ONLY

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 OCT -5 AM 8:33

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input checked="" 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

☐ Certificate of FICTITIOUS NAME

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TALLAHASSEE, FLORIDA

Ordered By: _____

Date: _____

**ARTICLES OF ORGANIZATION
OF
WAIDE DEVELOPMENT SOUTHEAST, LLC
a Florida Limited Liability Company**

FILED
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DIVISION OF CORPORATIONS
99 OCT -5 AM 8:34

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a Limited Liability Company under the laws of the State of Florida do set forth the following:

1. NAME. The name of the Limited Liability Company is WAIDE DEVELOPMENT SOUTHEAST, LLC (the "Company").

2. PERIOD OF DURATION. The period of duration of the Company shall be perpetual.

3. PURPOSE. The purpose for which the Company is organized is to engage in any and all businesses and activities permitted by the laws of the State of Florida. The Company shall have all of the powers vested in a limited liability company organized and existing by virtue of such laws.

4. MAILING AND STREET ADDRESS OF PRINCIPAL OFFICE. The street address of the principal office of the Company is: 1543 Highway 138 S., Suite P, Conyers, Georgia, 30013.

5. REGISTERED AGENT. The name and address of the initial registered agent in the State of Florida, whose Consent to Appointment as Registered Agent accompanies these Articles of Organization, is: NRAI Services, Inc., 526 East Park Avenue, Tallahassee, Florida 32301.

6. ADDITIONAL MEMBERS. Members may admit additional members upon the majority vote of the then existing members.

7. CONTINUITY; NO RIGHT TO DISTRIBUTION ON WITHDRAWAL. The remaining Members of the limited liability company will have the right to continue the business upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a Member or occurrence of any other event which terminates the continued membership of a Member in this limited liability company. No Member shall be entitled to receive a return of capital or other distribution upon withdrawal from this limited liability company or otherwise, except as otherwise provided in the Regulations of this limited liability company.

8. MANAGEMENT. The business of the limited liability company shall be managed by one or more Managers. The name and address of the initial Manager, who will serve until the first annual meeting of members or until its successor is elected and qualified, is as follows:

Name

Address

Waide J. Fleming

1543 Highway 138 S., Suite P
Conyers, Georgia 30013

The undersigned has executed these Articles of Organization on the 1 day of
OCTOBER, 1999.

By: 

Waide J. Fleming, Manager

**CERTIFICATION OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, 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: WAIDE DEVELOPMENT SOUTHEAST, LLC.
2. The name and address of the registered agent and office is:

NRAI Services, Inc.
526 E. Park Avenue
Tallahassee, Florida 32301

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 its 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.

NRAI Services, Inc.

By: _____

Title: Assistant Secretary
Registered Agent

(Date)

10/5/99