

L 01000004368

CT CORPORATION SYSTEM

CORPORATION(S) NAME

Orange Blossom Mobile Park, LLC

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200003890542--6
-03/21/01--01071--004
****130.00 ****130.00

- | | | |
|--|---|---|
| <input type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> Nonprofit | | |
| <input type="checkbox"/> Foreign | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| | <input type="checkbox"/> Reinstatement | |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input checked="" type="checkbox"/> LLC | <input type="checkbox"/> Name Registration | <input type="checkbox"/> Change of RA |
| | <input type="checkbox"/> Fictitious Name | <input type="checkbox"/> JCC |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Photocopies | <input checked="" type="checkbox"/> CUS |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out | | |

Name _____
Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____

3/21/01

Order#: 3880418

Ref#: _____

Amount: \$ _____

cjc

FILED
01 MAR 21 PM 2:07
RECEIVED
01 MAR 21 AM 11:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATION

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

ARTICLES OF ORGANIZATION FOR ORANGE BLOSSOM MOBILE PARK, LLC

ARTICLE I – Name:

The name of the Limited Liability Company is: Orange Blossom Mobile Park, LLC

ARTICLE II – Address:

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

2121 N.W. 29th Court
Fort Lauderdale, FL 33311

ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Davis and Bellinson, LLC
Name

2121 N.W. 29th Court
Florida street address (P.O. Box **NOT** acceptable)

Fort Lauderdale, FL 33311
City, State, and Zip

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01 MAR 21 PM 2:07
SECRETARY OF STATE
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 as provided for in Chapter 608, F.S.

Davis and Bellinson, LLC

Howard Gold Authorized Agent
Registered Agent's Signature

ARTICLE IV – Management (Check box if applicable.)

☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company.

The business of the Company is to be managed by its members. The number of members and their powers and responsibilities shall be set forth in the Operating Agreement of the Company as same may be amended from time to time.

(An additional article must be added if an effective date is requested)

ARTICLE V – Duration

The Company's existence shall commence upon the filing of these Articles with the Florida Secretary of State and the Company's existence shall be perpetual unless: (i) otherwise agreed to by the members in the Operating Agreement of the Company as same may be amended from time to time; or (ii) dissolved by the members pursuant to the Operating Agreement of the Company as same may be amended from time to time.

Howard Gold, Authorized Representative of
Signature of a member or an authorized representative of a member. the Members

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Howard Goldman
Typed or printed name of signee

FILING FEES:

\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (OPTIONAL)
\$ 5.00 Certificate of Status (OPTIONAL)

FILED
01 MAR 21 PM 2:07
SECRETARY OF STATE
TALLAHASSEE FLORIDA