

L04000079305

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

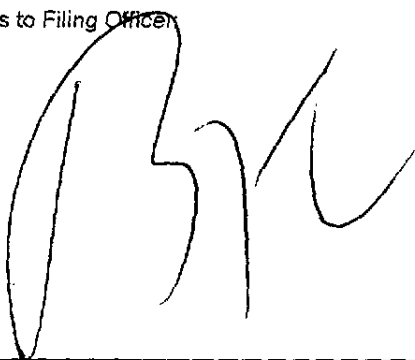
PICK-UP     WAIT     MAIL

(Business Entity Name)

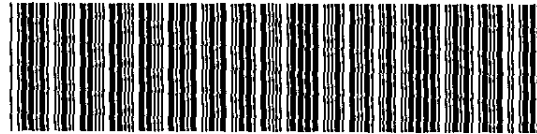
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04 NOV 2 AM 10:21  
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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

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**CAPITAL CONNECTION, INC.**

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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04 NOV -2 AM 10:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Shadow Oaks of Ocala, LLC*

- Art of Inc. File \_\_\_\_\_
- LTD Partnership File \_\_\_\_\_
- Foreign Corp. File \_\_\_\_\_
- L.C. File \_\_\_\_\_
- Fictitious Name File \_\_\_\_\_
- Trade/Service Mark \_\_\_\_\_
- Merger File \_\_\_\_\_
- Art. of Amend. File \_\_\_\_\_
- RA Resignation \_\_\_\_\_
- Dissolution / Withdrawal \_\_\_\_\_
- Annual Report / Reinstatement \_\_\_\_\_
- Cert. Copy \_\_\_\_\_
- Photo Copy \_\_\_\_\_
- Certificate of Good Standing \_\_\_\_\_
- Certificate of Status \_\_\_\_\_
- Certificate of Fictitious Name \_\_\_\_\_
- Corp Record Search \_\_\_\_\_
- Officer Search \_\_\_\_\_
- Fictitious Search \_\_\_\_\_
- Fictitious Owner Search \_\_\_\_\_
- Vehicle Search \_\_\_\_\_
- Driving Record \_\_\_\_\_
- UCC 1 or 3 File \_\_\_\_\_
- UCC 11 Search \_\_\_\_\_
- UCC 11 Retrieval \_\_\_\_\_
- Courier \_\_\_\_\_

Signature \_\_\_\_\_

Requested by: *WC*

Name \_\_\_\_\_

Date *11/11*

Time *4:30*

Walk-In \_\_\_\_\_

Will Pick Up \_\_\_\_\_

**ARTICLES OF ORGANIZATION  
OF  
SHADOW OAKS OF OCALA, LLC  
Under the Florida Limited Liability Company Act**

**FILED**  
04 NOV -2 AM 10:24  
SULLY COUNTY STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I**

**NAME**

The name of this limited liability company is **SHADOW OAKS OF OCALA, LLC**, a Florida limited liability company (the "Company").

**ARTICLE II**

**MAILING AND STREET ADDRESS**

The mailing and street address of the principal office of the Company is 811 East Hillsboro Boulevard, Deerfield Beach, Florida 33441.

**ARTICLE III**

**REGISTERED AGENT AND OFFICE**

The name and street address of the Company's initial registered agent in Florida is Carol A. Johnson, 811 East Hillsboro Boulevard, Deerfield Beach, Florida 33441.

**ARTICLE IV**

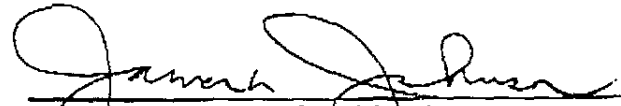
**MANAGEMENT**

The Company is to be a member managed Company.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization on the 1<sup>st</sup> day of November, 2004.



\_\_\_\_\_  
CAROL A. JOHNSON, Member



\_\_\_\_\_  
JAMES N. JOHNSON, Member



\_\_\_\_\_  
CONNIE C. WONSIK, Member



\_\_\_\_\_  
JOHN D. WONSIK, Member

**ACCEPTANCE OF DESIGNATION AS REGISTERED AGENT**

Having been named as Registered Agent to accept service of process for SHADOW OAKS OF OCALA, LLC at the place designated in the foregoing Articles of Organization, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of the Florida Limited Liability Company Act 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.

Dated: 11-1-, 2004

  
\_\_\_\_\_  
CAROL A. JOHNSON, Initial  
Registered Agent