

L 05000029420

(Requestor's Name)

(Address)

(Address)

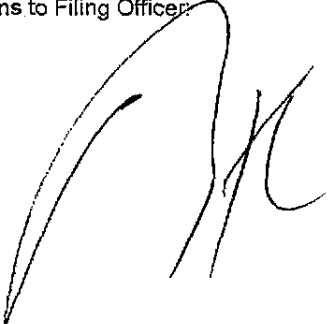
(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

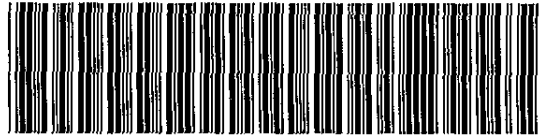
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05 MAR 24 PM 3:40
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TALLAHASSEE, FLORIDA

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05 MAR 24 PM 12:45
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TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 276209 4324186

AUTHORIZATION :

Patricia Pigato

COST LIMIT : \$ 160.00

05 MAR 24 PM 3:40
SECRETARY OF STATE
TALLAHASSEE FLORIDA
FILED

ORDER DATE : March 24, 2005

ORDER TIME : 11:16 AM

ORDER NO. : 276209-005

CUSTOMER NO: 4324186

CUSTOMER: Ms. Karen M. Renza
Milestone Properties, Inc.

Suite 103
200 Congress Park Drive
Delray Beach, FL 33445

DOMESTIC FILING

NAME: MIDDLE RIVER VENTURES, LLC

EFFECTIVE DATE:

- ARTICLES OF INCORPORATION
- CERTIFICATE OF LIMITED PARTNERSHIP
- ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT. 2956

EXAMINER'S INITIALS: _____

FILED
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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MIDDLE RIVER VENTURES, LLC

ARTICLE II - Address:

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

Principal Office Address:

11736 HIGHLAND PLACE
CORAL SPRINGS, FL 33071

Mailing Address:

11736 HIGHLAND PLACE
CORAL SPRINGS, FL 33071

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

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

STEVEN M. AUERBACHER, P.A.

Name

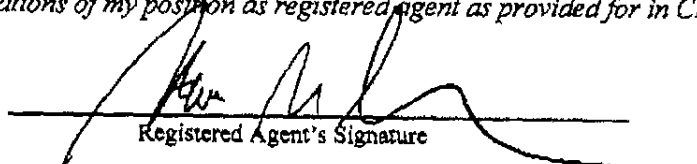
200 CONGRESS PARK DRIVE, #104

Florida street address (P.O. Box **NOT** acceptable)

DELRAY BEACH, FL 33445 FL

City, State, and Zip

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..


Registered Agent's Signature

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:
"MGR" = Manager
"MGRM" = Managing Member

Name and Address:

MGRM

PHIL FEINSTEIN
11736 HIGHLAND PLACE
CORAL SPRINGS, FL 33071

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 508.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

PHIL FEINSTEIN

Typed or printed name of signer

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)