

L05000056043

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

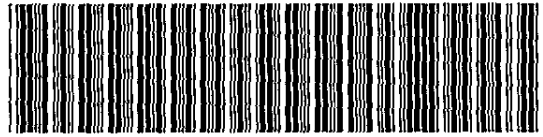
(Document Number)

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06/07/05--01032--006 \*\*155.00

~~EXPIRE DATE~~  
6/7/05

**FILED**  
05 JUN -7 PM 2:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**RECEIVED**  
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TALLAHASSEE, FLORIDA



UCC FILING & SEARCH SERVICES, INC.  
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05 JUN - 7 AM 2:22  
 FILED  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA  
 June 7, 2005

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

Johnson Winnetka LLC

~~EFFECTIVE DATE~~  
 6/27/05

**Filing Evidence**

- Plain/Confirmation Copy
- Certified Copy

**Retrieval Request**

- Photocopy
- Certified Copy

**Type of Document**

- Certificate of Status
- Certificate of Good Standing
- Articles Only
- All Charter Documents to Include Articles & Amendments
- Fictitious Name Certificate
- Other

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non Profit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of RA Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Reports
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation
<input type="checkbox"/>	Reinstatement

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

**EFFECTIVE DATE**  
6/3/05

ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY

**FILED**  
05 JUN -7 PM 2:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I - NAME:**

The name of the Limited Liability Company is:      JOHNSON WINNETKA LLC

**ARTICLE II - ADDRESS:**

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

PRINCIPAL OFFICE ADDRESS:

123 North Wacker Drive Suite 1950  
Chicago, IL 60606

MAILING ADDRESS:

123 North Wacker Drive Suite 1950  
Chicago, IL 60606

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:** The Name and the Florida street address of the registered agent are:

Charles M. Kelly, Jr.

Name


2640 Golden Gate Pkwy, Suite 305

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

Naples, Florida 34105

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

**ARTICLE IV - MANAGER(S) OF MANAGING MEMBER(S):**

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

TITLE:

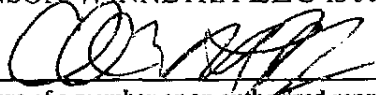
"MGRM"

NAME AND ADDRESS:

BLAKE R. JOHNSON  
123 North Wacker Drive Suite 1950  
Chicago, IL 60606

**ARTICLE V - EFFECTIVE DATE**

The effective date of JOHNSON WINNETKA LLC is June 3, 2005.



**Signature of a member or an authorized representative of a member.**  
(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.)

Charles M. Kelly, Jr

**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)**