

Florida Department of State

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LIMITED LIABILITY COMPANY

Westridge, LLC

Certificate of Status	1
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Estimated Charge	\$160.00

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T-119 P.002/003 F-312

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ARTICLES OF ORGANIZATION OF WESTRIDGE, LLC a Florida Limited Liability Company

2005 JUN 21 A 9:07 SECRETARY OF STATE TALLAHASSEE, FLORIDA

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. <u>NAME</u>. The name of the limited liability company is WESTRIDGE, LLC (the "Company").
- 2. MAILING AND STREET ADDRESS OF PRINCIPAL OFFICE. The mailing and street address of the principal office of the Company is: 2440 S.W. 105th Terrace, Davie, Florida 33324.
- 3. <u>REGISTERED AGENT</u>. 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 are: NRAI Services, Inc. at 2731 Executive Park Drive, Suite 4, Weston, Florida 33331.

The undersigned has executed these Articles of Organization on the 20 day of June, 2005.

Jonathan D. Mariner, Authorized Person

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2005 JUN 21 A 9: 07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATION OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

FURSUANT 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: WESTRIDGE, LLC.
- 2. The name and address of the registered agent and office are:

NRAI Services, Inc. 2731 Executive Park Drive, Suite 4 Weston, Florida 33331

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.

ATT AT Complete Two Descriptions Areas

6-20-05

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