

L05000079191

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

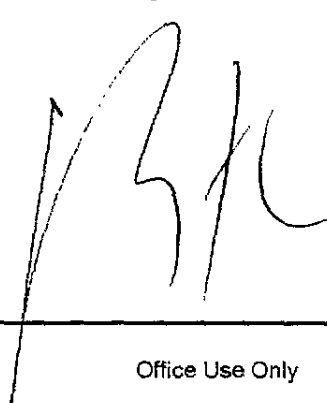
PICK-UP     WAIT     MAIL

(Business Entity Name)

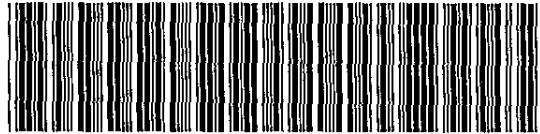
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05 AUG 11 PM 1:28  
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TALLAHASSEE, FLORIDA

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**CORPORATE  
ACCESS,  
INC.**

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

**WALK IN**

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CUS

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FILING LLC

1.) 9726 CCC L.L.C.  
(CORPORATE NAME & DOCUMENT #)

2.) \_\_\_\_\_  
(CORPORATE NAME & DOCUMENT #)

3.) \_\_\_\_\_  
(CORPORATE NAME & DOCUMENT #)

4.) \_\_\_\_\_  
(CORPORATE NAME & DOCUMENT #)

5.) \_\_\_\_\_  
(CORPORATE NAME & DOCUMENT #)

SPECIAL INSTRUCTIONS

ARTICLES OF ORGANIZATION OF  
9726 CCC, L.L.C.

Pursuant to Florida Statute 608.407, Florida Statutes, the following are Articles of Organization for 9726 CCC, L.L.C., a Florida limited liability company;

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TALLAHASSEE, FLORIDA

ARTICLE I

The name of the limited liability company is: 9726 CCC, L.L.C.

ARTICLE II

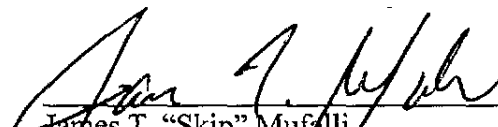
The mailing address and street address of the principal office of the limited liability company is: c/o of Richard T. Cotter, P.A 11050 Summerlin Square Dr., Fort Myers Beach, FL 33931.

ARTICLE III

The name and street address of its initial registered agent in the state of Florida are: Richard T, Cotter, P.A. 11050 Summerlin Square Dr., Fort Myers Beach, FL 33931

ARTICLE IV

This limited liability company is to be managed by a manager and the name and address of such manager is: James T. "Skip" Mufalli of 11050 Summerlin Square Dr., Fort Myers Beach, FL 33931, until the first annual meeting of the members or until his successor is elected and qualified.

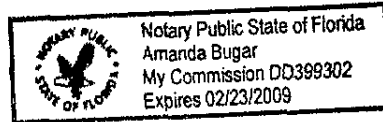
  
James T. "Skip" Mufalli  
Managing Member

  
Gary Wallace  
Member

STATE OF FLORIDA  
COUNTY OF LEE

Before me this day personally appeared JAMES T. "SKIP" MUFALLI, Managing Member, of 9726 CCC, L.L.C. who acknowledged before me that they executed the foregoing for the purposes therein expressed on this 9 day of August, 2005 and they were personally known to me or they produced \_\_\_\_\_ for identification.

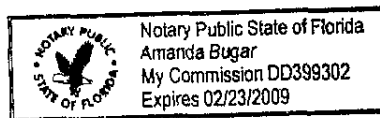
Signature of Notary: Amanda Bugar  
Print/type Name of Notary: Amanda Bugar  
My Commission Number: \_\_\_\_\_  
My Commission Expires: \_\_\_\_\_



STATE OF FLORIDA  
COUNTY OF LEE

Before me this day personally appeared GARY WALLACE, Member of 9726 CCC, L.L.C. who acknowledged before me that they executed the foregoing for the purposes therein expressed on this 9 day of August, 2005 and they were personally known to me or they produced \_\_\_\_\_ for identification.

Signature of Notary: Amanda Bugar  
Print/type Name of Notary: Amanda Bugar  
My Commission Number: \_\_\_\_\_  
My Commission Expires: \_\_\_\_\_

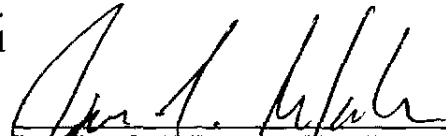
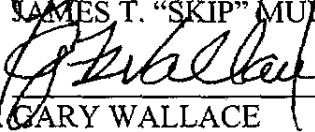


CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

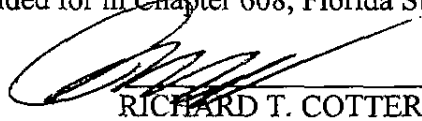
PURSUANT TO THE PROVISIONS OF SECTION 808.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DISIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: 9726 CCC, L.L.C.
2. The name and the Florida state address of the registered agent are:

Richard T. Cotter, P.A  
11050 Summerlin Square Dr.  
Fort Myers Beach, FL 33991

  
\_\_\_\_\_  
JAMES T. "SKIP" MUFALLI  
  
\_\_\_\_\_  
GARY WALLACE

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, Florida Statutes.

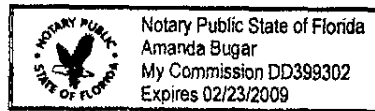
  
\_\_\_\_\_  
RICHARD T. COTTER, P.A

STATE OF FLORIDA  
COUNTY OF LEE

Before me this day personally appeared JAMES T. "SKIP" MUFALLI, Manager and Member of 9726 CCC, L.L.C. who acknowledged before me that they executed the foregoing for the purposes therein expressed on this 9 day of August, 2005 and they were personally known to me or they produced \_\_\_\_\_ for identification.

Signature of Notary Public: Amanda Bugar  
Print/Type Name of Notary: Amanda Bugar  
Commission Number: \_\_\_\_\_  
Commission Exp. Date: \_\_\_\_\_

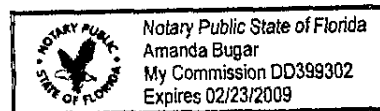
STATE OF FLORIDA  
COUNTY OF LEE



Before me this day personally appeared GARY WALLACE, Member of 9726 CCC, L.L.C. who acknowledged before me that they executed the foregoing for the purposes therein expressed on this 9 day of August, 2005 and they were personally known to me or they produced \_\_\_\_\_ for identification.

Signature of Notary Public: Amanda Bugar  
Print/Type Name of Notary: Amanda Bugar  
Commission Number: \_\_\_\_\_  
Commission Exp. Date: \_\_\_\_\_

STATE OF FLORIDA  
COUNTY OF LEE



Execution of the foregoing instrument was acknowledged before me this 9 day of August, 2005, by RICHARD T COTTER, as registered agent who is personally known to me or who has produced \_\_\_\_\_ as identification and who did \_\_\_\_\_ or did not  take an oath.

Signature of Notary Public: Sherry J. Bryant  
Print/Type Name of Notary: Sherry J. Bryant  
Commission Number: \_\_\_\_\_  
Commission Exp. Date: \_\_\_\_\_

