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(Re	equestor's Name)	
(Ac	ddress)	
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PICK-UP	WAIT	MAIL
(Ви	siness Entity Name)	
(Do	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	
		Mat
	Office Use Only	KIM



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COVER LETTER

Division of Corporations
SUBJECT: Arbours Management, LLC
(Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
David Sumrall
(Name of Person)
Arbours Management, LLC
(Firm/Company)
33 Inverness Center Parkway, Suite LL130
(Address)
Birmingham, AL 35242 ළැ යි
(City/State and Zip Code)
Birmingham, AL 35242 (City/State and Zip Code) For further information concerning this matter, please call: Gabe Ehrenstein (Name of Person) (Area Code & Daytime Telephone Number)
Gabe Ehrenstein # 561 \ 488-4457 \ SS \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Gabe Ehrenstein (Name of Person) at (561) 488-4457 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & \bigcup \\$155.00 Filing Fee & \bigcup \\$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status &
(additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address Street/Courier Address
Registration Section Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED

ARTICLE I - Name: The name of the Limited Liability Comp	any is:	
Arbours Management, LLC		
(Must end with the words "Limited Liability Company	y, "Limited Company" or their abbreviation "LLC," or "L.C.,")	
ARTICLE II - Address:		
The mailing address and street address of	f the principal office of the Limited Liability Compa	ny is:
Principal Office Address:	Mailing Address:	
33 Inverness Center Parkway	33 Inverness Center Parkway	
Suite LL130	Suite LL130	
Birmingham, AL 35242	Birmingham, AL 35242	
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its over business entity with an active Florida registration.) The name and the Florida street address of the Stephen G. Lowitz	ACSE	05 NOV 10 (
	Name Co	P# 2
3521 N. 53rd Ave	nue Să	<u></u>
Florida s	treet address (P.O. Box NOT acceptable)	\sim
Hollywood	22024	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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 (REQUIRED)

City, State, and Zip

(CONTINUED) Page 1 of 2

Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM Stephen G. Lowitz 3521 N. 53rd Avenue Hollywood, FL 33021 MGRM Gabriel Ehrenstein, Trustee 6340 Via Tierra Boca Raton, FL 33433 MGRM David Sumrall 33 Inverness Center Parkway, Suite LL130 Birmingham, AL 35242 John Moore MGRM 33 Inverness Center Parkway, Suite LL130 Birmingham, AL 35242 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business days to or 90 days after the date of filing.) REQUIRED SIGNATURE: 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.) Ehrow tein Typed or printed name of signee

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)

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

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