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(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
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COVER LETTER

TO:	Registration Se Division of Co				
SUBJE	_{сст:} <u>Greer</u>	acre Real Estate I			
		(Name of Limite	d Liability Comp	any)	
The end	closed Articles o	f Organization and fee(s) are s	ubmitted for filin	g.	
Please	return all corresp	ondence concerning this matte	r to the following	<u>;</u> :	
	Scot C. C	row			
•		(1	Name of Person)		
	Roetzel 8	Andress, LPA			
		(Firm/Company)		
	155 East	Broad Street, 1	2th Fir		
-			(Address)		· .
1	Columbu	ıs, Ohio 43215			
•			State and Zip Code)	· · · · · · · · · · · · · · · · · · ·
For furt	her information	concerning this matter, please	call:		
_					
Scot	C. Crow	of Person)	at (614	723-20	67 elephone Number)
	(i tunic	, or recisony	(Auca coa	e a Baytime 1	crephone rvamber)
Enclos	ed is a check fo	or the following amount:			
\$125	.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fi Certified Cop (additional copy	y	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrati Division Clifton B 2661 Exc	ourier Addression Section of Corporation duilding secutive Centersee, FL 32301	ns

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	RT	ICL	Æ I	I - N	ame:

The name of the Limited Liability Company is:

Greenacre Real Estate Investments, LLC

business entity with an active Florida registration.)

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:	
4630 Rue Bordeaux	4630 Rue Bordeaux	
Lutz, Florida 33558	Lutz, Florida 33558	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another

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

Jeπrey L	Greenacre
	Name
4630 Ru	ue Bordeaux
	Florida street address (P.O. Box NOT acceptable
Lutz	_{FL} 33558
	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 osition as registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

DIVISION OF CORPORATIONS

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Jeffrey L. Greenacre 4630 Rue Bordeaux Lutz, Florida 33558
	•
(Use attachment if necessary)	
CLE V: Effective date, if other than the effective date is listed, the date must 190 days after the date of filing.)	e date of filing: (OPTIONAL) be specific and cannot be more than five business days p

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.)

Jeffrey L. Greenacre

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)