

L07000042822

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H07000106645 3)))



H070001066453ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
07 APR 20 AM 10:14

To: Division of Corporations
Fax Number : (850) 205-0383

From: Account Name : RUDEN, MCCLOSKEY, SMITH, SCHUSTER & RUSSELL, P.A.
Account Number : 076077000521
Phone : (954) 527-2428
Fax Number : (954) 333-4001

RECEIVED

07 APR 20 PM 4:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Aquila Wellington Partners LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION
OF
AQUILA WELLINGTON PARTNERS LLC
a Florida limited liability company

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
APR 20 11 41 AM '07

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 does set forth the following:

1. NAME. The name of the limited liability company is Aquila Wellington Partners LLC (the "Company").
2. MAILING AND STREET ADDRESS OF PRINCIPAL OFFICE. The mailing and street address of the principal office of the Company is: c/o Aquila Property Company, Inc., 15430 Endeavour Drive, Jupiter, Florida 33478.
3. REGISTERED AGENT. 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., 2731 Executive Park Drive, Suite 4, Weston, Florida 33331.

The undersigned has executed these Articles of Organization on the 20 day of April, 2007.

AQUILA WELLINGTON PARTNERS LLC

By: 
Jordan Paul, Authorized Representative

H07000106645 3

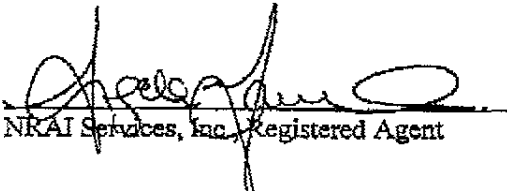
CERTIFICATION OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT 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: Aquila Wellington Partners 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.



NRAI Services, Inc. Registered Agent

4-20-07

(Date)

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
07 APR 20 AM 10:14