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PICK-UP WAIT MAIL					
(Deines 5-10-10-10-10-10-10-10-10-10-10-10-10-10-					
(Business Entity Name)					
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Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
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Office Use Only



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TO MAY -3 PM 4: 34
SECRETARY OF STATE
TAIL AHASSEE FEIGHE

J. BRYAN

MAY - 4 2010

EXAMINER

RUSH, MARSHALL, JONES AND KELLY, P.A.

FLETCHER G. RUSH (1917-2003)
CHARLES V. MARSHALL (1929-1994)
DAVID B. JONES
ROGER A. KELLY
JAMES C. HINCKLEY*
ROBERT S. HOOFMAN**
GARY J. LUBLIN
LESLIE S. WHITE***
ROBERT J. WATSON, JR.
ANDREW W. HOUCHINS
**ALKO ADMITTED NEW YORK

**ALSO ADMITTED TEXAS
***ALSO ADMITTED ALABAMA

MAGNOLIA PLACE 109 EAST CHURCH STREET, 5TH PLOOR POST OFFICE BOX 3146 ORLANDO, FLORIDA 32802-3146

> 407-425-5500 FACSIMILE 407-423-0554 JHINCKLEY@RUSHMARSHALL.COM

April 28, 2010

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Southchase Parcel 1, LLC

Dear Sirs:

JCH/wpf Encl.

I enclose Articles of Organization for this LLC and a check for \$155.00.

Please file and send me a certified copy.

Very truly yours,

James C. Hinckley

U.\MyFiles\Current\LLC Cover letter wpd

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the	E Limited Liability (Company is:	
Southchase F	Parcel 1, LLC		
	(Must end with the words	"Limited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - The mailing add		ress of the principal office of the Limited L	Liability Company is:
Principal Offic	e Address:	Mailing Address:	
c/o World of Homes			
2884 S. Osceola Ave	enue		
Orlando, FL 32806			
*(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an ind *!business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Ferdinandsen Enterprises, Inc. Name dba World of Homes, 2884 S. Osceola Avenue Florida street address (P.O. Box NOT acceptable)		FILED SECRETARY OF STATE AHASSEE, FLORE	
	Orlando	FL 32806	2
liability com registered agen statutes relati	apany at the place de to and agree to act in ing to the proper and obligations of my pos	City, State, and Zip Igent and to accept service of process for the signated in this certificate, I hereby accept this capacity. I further agree to comply with complete performance of my duties, and I dition as registered agent as provided for in the Agent's Signature (REQUIRED)	the appointment as th the provisions of all am familiar with and

(CONTINUED)
Page 1 of 2

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:			
	MGRM		Southchase Parcel 1 Homeowners Associat c/o World of Homes, 2884 S. Osceola Avenu Orlando, FL 32806			
				SECRETARY	15- MAY -3	TE
• 4	1(Use attachment if nece	essary)		OF STATE	PH 4: 34	ED
(If ar		e date must be sp	e of filing: ecific and cannot be more than five b	. (OPTION ousiness da		
	REQUIRED SIGNAT	URE:				
	Signati	ure of a member by	an authorized representative of a member	 ^*		
	of this	cordance with section document constitutes the facts stated herein a	608.408(3), Florida Statutes, the execution s an affirmation under the penalties of perjury are true.)	7		
	Vicki		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)