

LO100000 8682

To: Nanette Causseaux

May 30, 2001

From: Cathleen Rogalny  
P.O. Box 1333  
Loxahatchee, Fl. 33470  
561-793-8962  
561-719-3585

Reference: Completion of LLC

400004376464--2

-06/08/01--01001--005

\*\*\*\*155.00 \*\*\*\*155.00

Please file this company for a LLC as quickly as possible, we are closing on the properties on Thursday May 31, 2001 at 2:00 P.M. I am very sorry for the inconvenience.

This will be greatly appreciated.

CORAFIA \$155.00

Thank you

Cathleen Rogalny

CC

The bank will be calling for confirmation

LO1-8682

FILED  
01 MAY 31 AM 10:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

INNOVATIVE PROPERTIES AT RIVERSIDE LLC

## ARTICLE II - Address:

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

mailing: P.O. Box 1333

LOXAHATCHEE, FL. 33470

142 OLD COUNTRY RD.

WELLINGTON, FL. 33414

## ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

CATHLEEN ROGALNY

Name

142 OLD COUNTRY RD

Florida street address (P.O. Box NOT acceptable)

WELLINGTON FL 33414

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 position as registered agent as provided for in Chapter 608, F.S..*

Cathleen Rogalny

Registered Agent's Signature

## Article IV - Management (Check box if applicable.)

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

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.)

CATHLEEN ROGALNY

Typed or printed name of signee

### Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

01 MAY 31 AM 10:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED