## L1000033378

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400167302164

TO ACKNOWLEDGE SUFFICIENCY OF FILING DEPARTMENT OF STATE DIVISION OF CORPORATIONS

B. KOHR
MAR 2 6 2010

EXAMINER

DIVISION OF CORPORATION

10 MAR 26 PM 2- 2-



CERTIFIED COPY

PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT. 2956

CORPORATION SERVICE COMPANY

•	
ACCOUNT NO. : 12000000195	74 OF
REFERENCE: 330245 4308005	NARCO S
AUTHORIZATION: S 135 00	29
COST LIMIT : \$ 125.00	
ORDER DATE: March 26, 2010	
ORDER TIME : 11:56 AM	
ORDER NO. : 330245-005	
CUSTOMER NO: 4308005	
DOMESTIC FILING	
NAME: ORLANDO LEASING COMPANY, LLC	
EFFECTIVE DATE:	
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	

EXAMINER'S INITIALS:

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company i	is:
Orlando Leasing Company, LLC	
(Must end with the words "Limited Lis	bility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liability Company is
rincipal Office Address:	Mailing Address:
675 Palm Beach Lakes Boulevard	SAME
Suite 900	
Vest Palm Beach, Florida 33401	
	ed Office, & Registered Agent's Signature: pistred Agent. You must designate an individual or another
he name and the Florida street address of the	registered agent are:
Spector Gadon & Rose	

360 Central Avenue, Suite 1550

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

St. Petersburg

FL 33701

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.

Spector Gadon & Rosen, LLP

Registered Agent's Signature (RBQUIRED)

(CONTINUED) Page 1 of 2

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	•
MGR	Harry Dillon Madonna
	1675 Palm Beach Lakes Blvd, Suite 900
	West Palm Beach, F1, 33401
MGR	Terri Amitrone
	1675 Palm Beach Lakes Blvd. Suite 90
	West Palm Beach, Florida 33401
MGR	Tony Thomas
	1675 Palm Beach Lakes Blvd., Suite 90 West Palm Beach, Florida 33401
LE V: Effective date, if other th	nan the date of filing: (OPTION
LE V: Effective date, if other the	nan the date of filing: (OPTION nust be specific and cannot be more than five business da
LE V: Effective date, if other the fective date is listed, the date in days after the date of filing.)  REQUIRED SIGNATURES	
LE V: Effective date, if other the flective date is listed, the date is days after the date of filing.)  REQUIRED SIGNATURES  Signature of this decomposition of this decomposition.	member or an authorized representative of a member.  with section 608.408(3). Florida Statutes, the execution and constitutes an affirmation under the penalties of perjury
LE V: Effective date, if other the fective date is listed, the date in days after the date of filing.)  REQUIRED SIGNATURES  Signature of the date of this decime that the facts	member or an authorized representative of a member.  with section 608.408(3). Florida Statutes, the execution
LE V: Effective date, if other the flective date is listed, the date in days after the date of filing.)  REQUIRED SIGNATURE  Signature of this document that the facts	member or an authorized representative of a member.  with section 608.408(3). Florida Statutes, the execution and constitutes an affirmation under the penalties of perjury stated herein are true.)
LE V: Effective date, if other the fective date is listed, the date in days after the date of filing.)  REQUIRED SIGNATURE  Signature of this document that the facts Harry Dill  Filing Fees;	member or an authorized representative of a member.  with section 608.408(3). Florida Statutes, the execution and constitutes an affirmation under the penalties of perjury stated herein are true.)
LE V: Effective date, if other the flective date is listed, the date in days after the date of filing.)  REQUIRED SIGNATURE  Signature of this document that the facts  Harry Dill  Filing Fees:	member or an authorized representative of a member. with section 608.408(3). Florida Statutes, the execution and constitutes an affirmation under the penalties of perjury stated herein are true.) Ion Madonna Typed or printed name of signee

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

Page 2 of 2