

	ACCOUNT NO.: 072	2100000032		
	REFERENCE : 750	227 430	7052	
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ORDER DATE	: June 29, 2000			
ORDER TIME	: 11:48 AM			
ORDER NO.	: 750227-005		2000	033100429
CUSTOMER NO	: 4307052			
CUSTOMER:	Vera Penev, Legal As Ungaretti & Harris	ssistant		
	Three First National Suite #3500 Chicago, IL 60602	l Plaza		
	DOMESTIC FILIN	<u>IG</u>		1 r
NAME	: CLIFFORD TARPO	ON SPRINGS	, LLC	TAKECI TA
EFFECTIVE DATE:				FIL JUN 30 CRETAR LAHASS
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION				PH 3: 23 SEE FLORID
PLEASE RETU	RN THE FOLLOWING AS	PROOF OF	FILING:	NIDA NIDA
CER	TIFIED COPY			
XX PLA	TIFICATE OF GOOD STA			

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is: Clifford Tarpon Springs, LLC

## **ARTICLE II - Address:**

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

343 Wainwright Drive Northbrook, IL 60062

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

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

Name

1201 Hays Street

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

FL 32301

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..

Wellowah W. Skipper
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 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.)

Vera Penev, authorized representative

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)