

L000000 10616

Harsh Sharma, M.D.
Requester's Name

950 Fifth Avenue North
Address

Naples, FL 34102-5817
City/State/Zip Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

100003378601--2
-08/31/00--01049--004
****125.00 ****125.00

- 1. _____ (Corporation Name) _____ (Document #)
- 2. _____ (Corporation Name) _____ (Document #)
- 3. _____ (Corporation Name) _____ (Document #)
- 4. _____ (Corporation Name) _____ (Document #)

- Walk in Pick up time _____
- Mail out Will wait Photocopy Certified Copy Certificate of Status

NEW FILINGS

- Profit
- Not for Profit
- Limited Liability

AMENDMENTS

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

REGISTRATION/QUALIFICATION

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

- Name Domestication
- Availability Other

OTHER FILINGS

- Updater Annual Report **RCC**
- Updater Fictitious Name **DCC**
- Verifier **DCC**
- Recognition **DCC**
- W.P. Verifier **DCC**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
00 AUG 31 AM 11:14
FILED

Examiner's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: **WATERFRONT RANCH LLC.**

ARTICLE II - Address:

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

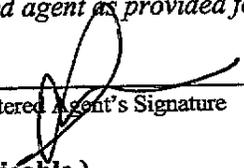
HARSH SHARMA
950, FIFTH AVE. NORTH, NAPLES
FL. 34102

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

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

HARSH SHARMA
950, FIFTH AVE NORTH
Florida street address (P.O. Box **NOT** acceptable)
FL
NAPLES City, State, and Zip **FLORIDA 34102**

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.



Registered Agent's Signature

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TALLAHASSEE, FLORIDA

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.)

HARSH SHARMA.

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)