Division of Corporation

https://ccfss1.dos.state.fl.us/scripts/efficovr.exe

## Florida Department of State

Division of Corporations

Public Access System Katherine Harris, Secretary of State

## **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H010000125673)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)922-4003

From:

Account Name : FILINGS, ÎNC. Account Number : 072720000101

: (850)385-6735 : (954)791-3109 Fax Number

AL

## LIMITED LIABILITY COMPANY

WEST SPRINGS PROPERTIES, L.L.C.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

1/31/01 9:07 AM

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILIT	Y COME	ANI	7
ARTICLE I - Name: The name of the Limited Liability Company is:  WEST SPENGS PROPERTIES, L.L.C.			
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Con 10435 N.W. SO <sup>44</sup> PLACE CONAL SPAINSS, FL. 33076	wpany is:		
CONCAL SPATIFES, PL 33076	25	2	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signatur	CRETA	JAN 31	
The name and the Florida street address of the registered agent are:	SSTRY		
John D. AMEEN Name Name Suit University Onive Suite 608 Ploridy speed address (P.Q. Box NOT acceptable)	OF STATE	PM 1:29	Ċ
COKAC SM 65, A 33065	المستقية		
City, State, and Zip			
Having been named as registered agent and to accept service of process for the above stat liability company at the place designated in this certificate, I hereby accept the appointment registered agent and agree to act in this capacity. I further agree to comply with the provisitatives relating to the proper and complete performance of my duties, and I am familiar was accept the obligations of my position as registered agent as provided for in Chapter 608, I	nt as isions of a vith and		
Registered Agent's Signature			
$m{arphi}$			

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 applitional article must be added if an effective date is requested) gnature 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.)

Typed or printed name of signee

Filing Fee: 50r Articles of Organization \$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)