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Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: PALM HOMES, LLC SUBJECT: PALM HOMES, LLC

Enclosed is an original and one (1) copy of the articles of organization and a check for:

\$ 130.00 payable to "Florida Department of State"

for

Filing Fee, Designation of Registered Agent and Certificate of Status

From:STEVE LOVELESS	INGCI
5125 CASTELLO DR.	101-4999
NAPLES, FL 34103	The second
PHONE NUMBER (941) 514-3811	



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

March 15, 2001

STEVE LOVELESS 5125 CASTELLO DRIVE NAPLES, FL 34103

SUBJECT: PALM HOMES, LLC Ref. Number: W01000005880

We have received your document for PALM HOMES, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6020.

Tammi Cline Document Specialist

Letter Number: 001A00015834

ÂRTICLES OF ORGANIZĂTION FOR FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE I - Name:
The name of the Limited Liability Company is:
PALM HOMES, LLC
ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:
5125 CASTELLO DR.
NAPLES, FL 34103
ADTICLE III Desistented Asset Projectured Office & Decident Asset Co.
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
5125 CASTELLO De.
Florida street address (P.O. Box NOT acceptable)
NAPLES, FL 34103 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
A secopt the congunities of my position as registered agent as provided for in Chapter 600, 1.5
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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.
mererore, a manager - managed company.
Registered Agent's Signature
(An additional article must be added if an effective date is requested)
Dille and MEMPER
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.)

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)