# L010000012105 DEPARTMENT OF STATE FILING COVER SHEET

	Date:	7/3/01	
	Requestor Name:	Carlton Fields	
	Address:	Post Office Box 190 Tallahassee, Florida 32302	
	Telephone:	(850) 224-1585	4
	Contact Name:	Kim Pullen (261)	<u> </u>
	Corporation Name:	TOTALE CONTROL OF THE PROPERTY	AND AND STAND
	Entity Number (if applied Authorization:	Cable): L61006012105 D	
	Certified Copy (1-9)	S0000450935   -07/31/0101022   Plain Copy	517 2-017 ##25.00
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/		· ✓ AMENDMENTS/REGISTRATION/	

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	NEW FILINGS/OTHER FILINGS		QUALIFICATION
	PROFIT		AMENDMENT Correction
	NONPROFIT		RESIGNATION OF R.A., OFFICER/DIRECTOR
	LIMITED LIABILITY		CHANGE OF REGISTERED AGENT
	DOMESTICATION		DISSOLUTION/WITHDRAWAL
	OTHER		MERGER
	ANNUAL REPORT		FOREIGN CORPORATION
	FICTITIOUS NAME		LIMITED PARTNERSHIP
	NAME RESERVATION		REINSTATEMENT INS
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CF Internal Use Only

Client: 45678 Matter: 06514

DEPARTMENT OF STATE

TAL#501656.02

# ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted <u>within the required 30</u> <u>business days</u> to correct the <u>attached</u> articles of organization or application to transact business in Florida.

FIRST	The name of the limited liability company is: Connie III, LLC					
<u>SECO</u>	ND: The articles of organization or the application to transact business					
(CH	ECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT		•			
X	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:  The incorrect statement is the name of the Company. The corrected					
	statement is: "The name of the Company is The Connie III Skyhawk, LLC"					
	<u>OR</u>					
	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:					
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Dated:			1			
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	Signature of a member or authorized representative of a member Cristin C. Gieser, authorized representative					
	Typed or printed name of signee					
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)					

# ARTICLES OF ORGANIZATION OF CONNIE III, LLC A FLORIDA LIMITED LIABILITY COMPANY

The undersigned, acting as the authorized representative of a limited liability company under the Florida Limited Liability Company Act, adopts the following Articles of Organization for such limited liability company (the "Company"):

#### ARTICLE I Name

The name of the Company is Connie III, LLC.

## ARTICLE II Principal Office and Mailing Address

The principal office and mailing address of the Company are: 601 Tomahawk Trail, Brandon, Florida 33511-8087

### ARTICLE III Initial Registered Agent and Office

The street address of the initial registered office of the Company One Harbour Place, 777 Harbour Island Boulevard, Tampa, Florida 33602-5730, and the name of its initial registered agent at that address is Cristin C. Gieser.

## ARTICLE IV <u>Authorized Representative</u>

The name and address of authorized representative of the Company executing these Articles of Organization are:

Name

Address

Cristin C. Gieser

One Harbour Place 777 Harbour Island Boulevard Tampa, Florida 336025730

Prepared by: Cristin C. Gieser Florida Bar No.: 123153 Carlton Fields, P.A. P. O. Box 3239 Tampa, FL 33601 (813) 223-7000

AUDIT NO. H01000083880 4

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#### ARTICLE V Member

The names and addresses of the initial members of the Company are:

Name

Address

Jerry R. Dean

601 Tomahawk Trail

Brandon, Florida 33511-80870

Connie L. Dean

601 Tomahawk Trail

Brandon, Florida 33511-80870

John H. Dean

601 Tomahawk Trail

Brandon, Florida 33511-80870

Dated this 23rday of July 2001.

By:

Name: Cristin C. Gieser

Authorized Representative

#### ACCEPTANCE BY REGISTERED AGENT

Having been named as registered agent and to accept service of process for the Company, at the place designated as the registered office, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of the undersigned's duties, and the undersigned is familiar with and accepts the duties and obligations of the undersigned's position as registered agent.

Dated this 23rday of July 2001.

REGISTERED AGENT:

Name: Cristin C. Gleser

TPA#1701544.01

