

**CAPITAL CONNECTION, INC.**

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

**L01000020653**

Ibis Properties, LLC

500004700105---7  
-11/30/01--01038--018  
\*\*\*\*125.00 \*\*\*\*125.00

- RECEIVED  
01 NOV 30 AM 11:37  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE  
01 NOV 30 PM 12:40
- APPROVED  
AND  
FILED
- 11/30/01
- ☐ Art of Inc. File
  - ☐ LTD Partnership File
  - ☐ Foreign Corp. File
  - ☒ L.C. File
  - ☐ Fictitious Name File
  - ☐ Trade/Service Mark
  - ☐ Merger File
  - ☐ Art. of Amend. File
  - ☐ RA Resignation
  - ☐ Dissolution / Withdrawal
  - ☐ Annual Report / Reinstatement
  - ☐ Cert. Copy
  - ☒ Photo Copy
  - ☐ Certificate of Good Standing
  - ☐ Certificate of Status
  - ☐ Certificate of Fictitious Name
  - ☐ Corp Record Search
  - ☐ Officer Search
  - ☐ Fictitious Search
  - ☐ Fictitious Owner Search
  - ☐ Vehicle Search
  - ☐ Driving Record
  - ☐ UCC 1 or 3 File
  - ☐ UCC 11 Search
  - ☐ UCC 11 Retrieval
  - ☐ Courier

Signature \_\_\_\_\_

Requested by: SK

Name \_\_\_\_\_

Date 11/30/01

Time 10:05

Walk-In \_\_\_\_\_

Will Pick Up \_\_\_\_\_

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

Ibis Properties, LLC

## ARTICLE II - Address:

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

2850 Christy Lane, St. Cloud, FL 34772

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

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

Scott J. Henderson

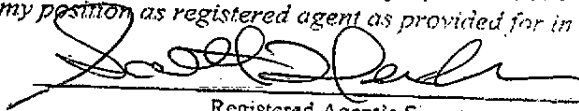
2850 Christy Lane

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

St. Cloud FL 34772

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.*



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 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.)

See Scott J. Henderson

Typed or printed name of signer

### 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)

01 NOV 30 PM 12:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED