

# L02000002332

## Florida Department of State

Division of Corporations  
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To: Division of Corporations  
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From: Account Name : KILGORE, PEARLMAN, STAMP, ORNSTEIN & SQUIRES  
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## LIMITED LIABILITY COMPANY

### BLUE TREE RESORT, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I – Name:**

The name of the Limited Liability Company is BLUE TREE RESORT, LLC.

**ARTICLE II – Address:**

The mailing address and street address of the principal office of the Limited Liability Company is 1503 West Smith Street, Orlando, Florida 32804.

**ARTICLE III – Duration:**

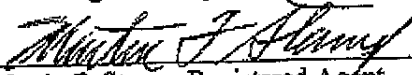
The period of duration for the Limited Liability Company shall be perpetual.

**ARTICLE IV – Registered Agent, Registered Office, & Registered Agent's Signature**

The name and Florida street address of registered agent are:

Martin F. Stamp  
2 South Orange Avenue  
5<sup>th</sup> Floor  
Orlando, FL 32801

*Having been named as registered agent and to accept service of process for the above state 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..*

  
Martin F. Stamp, Registered Agent

**ARTICLE V – Management:**

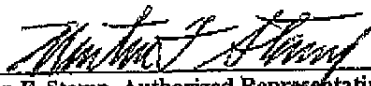
- ☒ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/arc: Max P. Cawal, 1503 West Smith Street, Orlando, Florida 32804.
- ☐ The Limited Liability Company is to be managed by the member and the name and address of the sole managing member is:

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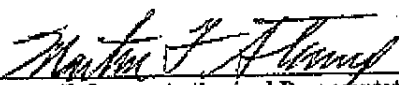
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IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this 30<sup>th</sup> day of January, 2002.

  
\_\_\_\_\_  
Martin F. Stamp, Authorized Representative of  
Max P. Cawal, Manager

(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.)

  
\_\_\_\_\_  
Martin F. Stamp, Authorized Representative of  
Max P. Cawal, Manager

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