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

Date: March 18, 2002

LLC Filings Office:

Keep Agreement for your records

I enclose an original and \_\_\_\_ copies of the proposed Articles of Organization of Star-Brock Properties, LLC, a proposed domestic limited liability company.

MOS RUO

Please file the Articles of Organization and return a certificate of formation, file-stamped copy of the original document or other receipt, acknowledgment or proof of filing to me at the address shown below my signature.

Payment for the required fees is enclosed.

Sincerely,

Signed: \_\_\_\_\_Olga G. Fournier

4880 Thompson Rd., St. Cloud, Fla. 34772

Telephone: 407-957-0680

200005154222--: -03/25/02--01073--007 \*\*\*\*130.00 \*\*\*\*\*130.00

MJH

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#### FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

March 27, 2002

OLGA G. FOURNIER 4880 THOMPSON RD. ST. CLOUD, FL 34772

SUBJECT: STAR-BROCK PROPERTIES, LLC

Ref. Number: W02000008627

We have received your document for STAR-BROCK PROPERTIES, 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):

The registered agent must sign accepting the designation.

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) 245-6967.

Michelle Hodges Document Specialist

Letter Number: 602A00018375

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### Article I - Name:

The name of the Limited Liability Company is:

Star-Brock Properties, LLC

#### Article II - Address:

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

4880 Thompson Road, St. Cloud, Florida 34772

## Article III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Olga G. Fournier.

Name

4880 Thompson Rd., St. Cloud. Fl. 34772

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

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.)

Olga G. Fournier

Typed or printed name of signee

FILING FEES:

V \$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) ILEU