

# LO2000008665



ACCOUNT NO. : 072100000032

REFERENCE : 523419 - 81514A

AUTHORIZATION :

*Tatucia Pignato*

COST LIMIT : \$ 155.00

ORDER DATE : April 11, 2002

ORDER TIME : 11:53 AM

ORDER NO. : 523419-005

CUSTOMER NO: 81514A

000005254510--0

CUSTOMER: Ms. Billie Ott  
Troiano & Roberts

P. O. Drawer 829  
317 South Tennessee Avenue  
Lakeland, FL 33801

DOMESTIC FILING

NAME: GULF PALM PROPERTIES, L.L.C.

EFFECTIVE DATE:

XX CERTIFICATE OF LIMITED PARTNERSHIP  
ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

Name Availability	
Document	<u>XX</u> CERTIFIED COPY
Examiner	PLAIN STAMPED COPY
Updater	<u>DC</u> CERTIFICATE OF GOOD STANDING
Updater driver	
Pro. ledgement	<u>DC</u>
P. Verifier	<u>DC</u>

CONTACT PERSON: Deborah Schroder - EXT. 1118  
EXAMINER'S INITIALS:

DIVISION OF CORPORATION

02 APR 11 PM 12:09

RECEIVED

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**ARTICLE I – Name:**

The Name of the Limited Liability Company is: **GULF PALM PROPERTIES, L.L.C.**

**ARTICLE II – Address:**

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

a: Mailing Address: 1704 Sagebrush Road, Plant City, FL 33567

b: Street Address: 1704 Sagebrush Road, Plant City, FL 33567

**ARTICLE III – Registered Agent, Registered Office & Registered Agent's Signature:**

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

SYLVAN G. VINCENT

Name

1704 Sagebrush Road

Florida street address (Post Office Box **NOT** acceptable)

Plant City, FL 33567

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

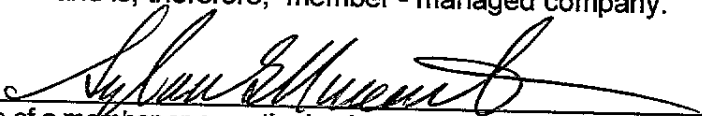
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**ARTICLE IV – Management (Check applicable box)**

The Limited Liability Company is to be managed by one manager or managers and is, therefore, a manager – managed company.

The Limited Liability Company is to be managed by one member or members and is, therefore, member - managed company.

  
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.)

SYLVAN G. VINCENT

Typed or printed name of signee