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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA**Florida Department of State**
Division of Corporations
Public Access System
Katherine Harris, Secretary of State**Electronic Filing Cover Sheet****Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**To:**Division of Corporations
Fax Number : (850) 205-0383**From:**Account Name : GRAY, HARRIS & ROBINSON, P.A. - ORLANDO
Account Number : I20010000078
Phone : (407) 843-8880 x6346
Fax Number : (407) 244-5690**LIMITED LIABILITY COMPANY****RGD RESIDENTIAL, LLC****RECEIVED**
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Certificate of Status	1
Certified Copy	1
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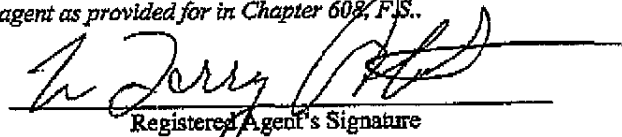
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**The name of the Limited Liability Company is: **RGD RESIDENTIAL, LLC****ARTICLE II - Address:**

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

247 North Westmonte Drive
Altamonte Springs, Florida 32714**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

W. Terry Costolo, Esquire
Gray, Harris & Robinson, P.A.
301 East Pine Street, Suite 1400
Orlando, Florida 32801*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.)

Dwayne Walker
Typed or Printed name of Signee**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)

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