

# LD-2000015056

D. Lawrence Howard, P.A.

1506 Prudential Drive  
Suite 209  
Jacksonville, Florida 32207  
Telephone (904) 396-9963  
Facsimile (904) 396-9983

June 14, 2002

Florida Department of State  
Registration Section  
409 E. Gaines St.  
Tallahassee, Florida 32399

700005797587--5  
-06/17/02--01078--016  
\*\*\*\*\*130.00 \*\*\*\*\*130.00

To whom it may concern:

Enclosed please find a check in the amount of \$130.00 relevant to Alpha Real Estate Investment, LLC. Please return the certificate of status to me at the above address. Thanks for your cooperation in this matter.

Sincerely,



D. Lawrence Howard

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is: *Alpha Real Estate Investments, LLC*

## ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:  
*1506 Prudential Drive, Suite 209, Jacksonville, FL 32207*

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

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

*D. Lawrence Howard*  
Name  
*1506 Prudential Drive, Ste 209*  
Florida street address (P.O. Box NOT acceptable)  
*JACKSONVILLE* *FL* *32207*  
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.*

*D. Lawrence Howard*  
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)

*D. Lawrence Howard*  
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.)

*D. Lawrence Howard*  
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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