

LO2000031073

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

Certified Copies 1    Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

11/19 FLUC

Office Use Only



900008978449



11/19/02--01060--003    \*\*155.00

FILED  
02 NOV 19 AM 10:33  
TALLAHASSEE, FLORIDA

**LEFKOWITZ, BLOOM & SHAW, P.A.**  
ATTORNEYS AND COUNSELORS AT LAW

IVAN M. LEFKOWITZ\*  
GWEN D. BLOOM†  
THOMAS C. SHAW  
SHIRA B. MCKINLAY\*\*

430 NORTH MILLS AVENUE  
ORLANDO, FLORIDA 32803

TELEPHONE (407) 425-1974  
FACSIMILE (407) 425-1981  
WEBSITE: ORLANDOLAW.ORG

\* BOARD CERTIFIED IN TAXATION AND  
MASTER OF LAWS IN ESTATE PLANNING  
† ALSO ADMITTED IN MASSACHUSETTS  
\*\* ADMITTED ONLY IN CALIFORNIA  
AND MINNESOTA

November 13, 2002

Attn: Corporations Division  
Secretary of State  
Bureau of Corporate Records  
Post Office Box 6327  
Tallahassee, Florida 32314

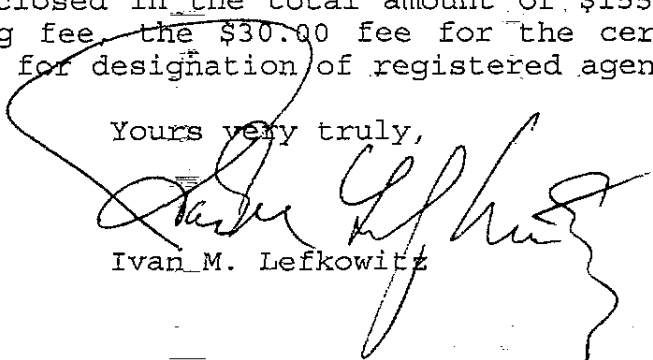
Re: Aberdeen Properties, L.L.C.  
Effective Date: Date of Filing

Dear Sir or Madam:

Enclosed are the original and a duplicate copy of the Articles of Organization of the above proposed Limited Liability Company. The duplicate copy has been subscribed and acknowledged by the subscriber in the same manner as the original. Please endorse your approval of the Articles of Organization on the duplicate copy, and return a certified copy to this office.

A check is also enclosed in the total amount of \$155.00 to cover the \$100.00 filing fee, the \$30.00 fee for the certified copy, and the \$25.00 fee for designation of registered agent.

Yours very truly,

  
Ivan M. Lefkowitz

IML:glg  
Enclosures  
cc: Geraldine McDonald, Manager

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ABERDEEN PROPERTIES, L.L.C.

ARTICLE II - Address:

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

1801 GRINNELL TERR., WINTER PARK, FLORIDA 32789

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

The name of the Florida street address of the registered agent is:

IVAN M. LEEKOWITZ

Name

430 NORTH MILLS AVENUE

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

ORLANDO, FLORIDA 32803

City, State, and Zip

FILED  
NOV 19 AM 10:33  
STATE  
TREASURER  
FLORIDA

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.

ARTICLE V - Effective Date

The Limited Liability Company shall have an effective date of:  
DATE OF FILING

Geraldine F. McDonald

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.)

GERALDINE F. McDONALD

Typed or printed name of signee