

L03000004668

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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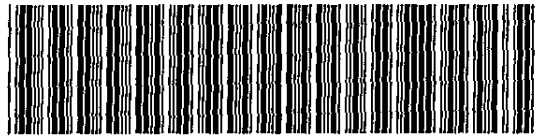
(Business Entity Name)

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

COLONIAL INVESTMENT PARTNERS, L.L.C.

ARTICLE II - Address:

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

8603 SOUTH DIXIE HIGHWAY, SUITE 208, MIAMI, FLORIDA 33143

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

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

STEVEN D. LOSNER

Name

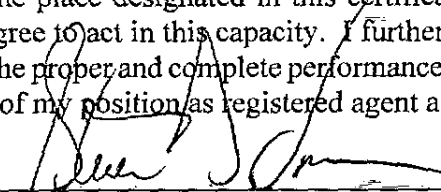
65 NW 16TH STREET

Florida Street Address (P.O. Box **NOT** acceptable)

HOMESTEAD, FLORIDA 33030

City, State, and Zip

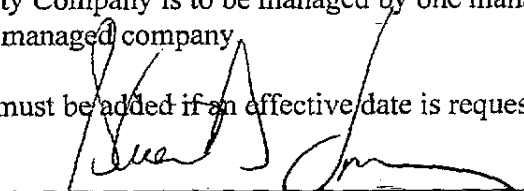
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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

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).

STEVEN D. LOSNER, Authorized Representative

Typed or printed name of signer

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