

L03000008166

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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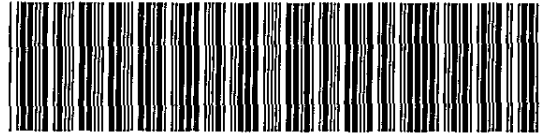
(Business Entity Name)

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SECTION OF STATE  
TALLAHASSEE, FLORIDA

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STATE  
CORPORATIONS  
TALLAHASSEE, FLORIDA

*BR*



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 954573 7160058

AUTHORIZATION :

COST LIMIT : \$ 125.00

*Patricia Pizulo*

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TALLAHASSEE, FLORIDA

ORDER DATE : March 5, 2003

ORDER TIME : 2:07 PM

ORDER NO. : 954573-005

CUSTOMER NO: 7160058

CUSTOMER: Joanne Capuano, Legal Asst  
David J. Wiener, P.a.

Suite 305  
One North Clematis Street  
West Palm Beach, FL 33401

DOMESTIC FILING

NAME: LIVE OAK COMERCIAL ASSOCIATES,  
LLC

EFFECTIVE DATE:

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Ginger Simmons - EXT. 1139

EXAMINER'S INITIALS: \_\_\_\_\_

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name:**

The name of the Limited Liability Company is:  
LIVE OAK COMMERCIAL ASSOCIATES, LLC

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:  
One North Clematis Street, Suite 305, West Palm Beach, FL 33401

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

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

David J. Wiener, P.A.

Name

One North Clematis Street, Suite 305

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

West Palm Beach

FL 33401

City, State, and Zip

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SECRETARY OF STATE  
TALLAHASSEE, 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

(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.)

David J. Wiener

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)