

L03 0000 13622

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

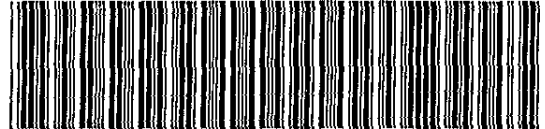
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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April 10, 2003

Registration Section Division of Corporations
PO Box 6327
Tallahassee, FL 32314


Re: Seton - Mt. Dora, LLC.

To Whom it May Concern:

Enclosed please find original Articles of Organization for the above-referenced Limited Liability Company together with my check in the amount of \$160.00 for the filing fee, designation of registration, certified copy of Articles of Organization and Certificate of Status.

Please feel free to contact the undersigned if you have any questions. Thank you.

Very truly yours,



James H. Messenger

JHM/pl
Enclosure

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: **Seton - Mt. Dora, LLC**

ARTICLE II - Address:

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

121 Shirley Road, Syracuse, New York 13224

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

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

James R. Sullivan

Name

6040 S.W. 18th Street

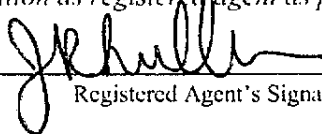
Florida street address (P.O. Box **NOT** acceptable)

Plantation

FL 33317

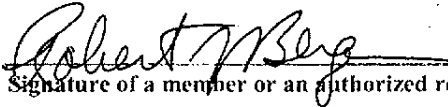
City, State, and Zip

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

(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.)

Robert Berger, Member

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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FLORIDA