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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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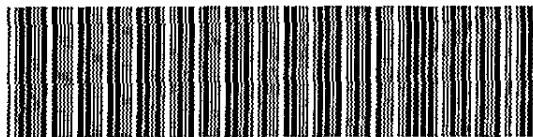
(Business Entity Name)

(Document Number)

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*William C. Malone, IV*

ATTORNEY AND COUNSELOR AT LAW

1800 Pembroke Dr., Suite 300, Orlando, FL 32810  
Telephone (407) 423-4040 Fax (407) 677-6729

June 6, 2003

Secretary of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: TOWNHOMES OF TALLAHASSEE, LLC

Dear Secretary:

Enclosed please find the Articles of Organization of TOWNHOMES OF TALLAHASSEE, LLC, with a copy and a check in the amount of \$125.00.

Please date stamp the copy and return it to this office in the envelope provided.

Very truly yours,

  
WILLIAM C. MALONE, IV

WCM:wcm

Enclosures

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:  
TOWNHOMES OF TALLAHASSEE, LLC

### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:  
2303 Woodleaf Court, Orlando, Florida 32837

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

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

William C. Malone, IV

Name

1800 Pembroke Drive, Suite 300, PMB 811

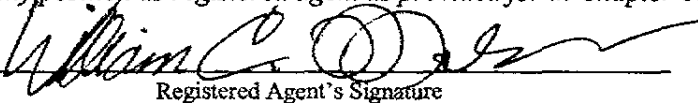
Florida street address (P.O. Box **NOT** acceptable)

Orlando,

FL 32810

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

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SECRETARY OF CORPORATIONS  
JUN 10  
AM 8:48

(An additional article must be added if an effective date is requested)

X   
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.)

X MARILYN G. PATRICK  
Typed or printed name of signer

### 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)