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## W. HENRY O'CONNELL

Certified Public Accountant 2200 N. Ponce De Leon Blvd. Suite 10 St. Augustine, FL 32084 Phone (904) 829-0082 Fax 904 829-5030 e-mail:tawwho1@bellsouth.net

June 26, 2003

Registration Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Dear Florida Department of State,

Enclosed are the articles of organization for Palm Mobile Home Park, L.L.C. and a check for \$100.00 to cover the filing fee. The name, mailing address and phone number of the signing member is: Farid Ashdji, 45 Anastasia Lakes Drive, St. Augustine, FL 32080, 904-806-0506. Should you have any questions, you may contact me at the above phone number.

Sincerely,

W. Henry O'Connell, CPA

## W. HENRY O'CONNELL

Certified Public Accountant
2200 N. Ponce De Leon Blvd. Suite 10
St. Augustine, FL 32084
Phone (904) 829-0082 Fax 904 829-5030 e-mail: taxwho1@bellsouth.net

Ms custine,

HERE IS THE CHECK

FOR PALM MOBILE HOME PARK

LLC.

. . . . -



July 3, 2003

W. HENRY O'CONNELL, CPA 2200 N. PONCE DE LEON BLVD., STE 10 ST AUGUSTINE, FL 32084

SUBJECT: PALM MOBILE HOME PARK, L.L.C. Ref. Number: W03000019017

We have received your document for PALM MOBILE HOME PARK, L.L.C. and your check(s) totaling \$100.00. However, the document has not been filed and is being retained in this office for the following:

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

We need a balance due or \$25.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Letter Number: 603A00039972

Diane Cushing Corporate Specialist

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

Palm Mobile Home Park, L.L.C.

### ARTICLE II - Address:

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

- 45 Anastasia Lakes Drive
- St. Augustine, FL 32080

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

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

W. Henry O'Connell, CPA	
Name	
2200 N. Ponce De Leon Blvd., #10	
Florida street address (P.O. Box NOT acceptable)	
St. Augustine, FL 32084 City, State, and Zip	DIVISION
Having been named as registered agent and to accept service of process for the above liability company at the place designated in this certificate, I hereby accept the appoin registered agent and agree to act in this capacity. I further agree to comply with the p statutes relating to the proper and complete performance of my duties, and I am famili accept the obligations of my position as registered agent as provided for in Chapter 60 Registered Agent's Signature	tment as Sorovision\$\foatige{3}\) iar with and
Article IV - Management (Check box if applicable.)  The Limited Liability Company is to be managed by one manager or more management therefore, a manager - managed company.	agers and is,
(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.)

Farid Ashdji

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)