

L03000027570

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

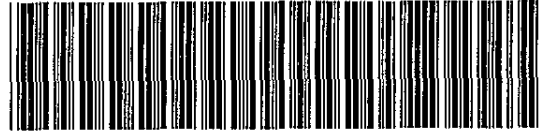
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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BK 07/28/03--01036--005 **190.00

TALLAHASSEE, FLORIDA
03 JUL 28 PM 1:51
FILED

RECEIVED
03 JUL 28 AM 11:37
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Sumstate Research
Requestor's Name

Address

City/State/Zip Phone #

Office Use Only

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03 JUL 28 PM 1:51
TALLAHASSEE, FLORIDA

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Courtney Estates Apartments, LLC
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

Walk in
 Mail out

Pick up time _____
 Will wait Photocopy

Certified Copy *two certified copies*
 Certificate of Status

one cos

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED
LIABILITY COMPANY**

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TALLAHASSEE, FLORIDA

ARTICLE I - Name

The name of the Limited Liability Company is:

COURTNEY ESTATES APARTMENTS, LLC

ARTICLE II - Address

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


100 Colonial Center Parkway
Suite 470
Lake Mary, Florida 32746

ARTICLE III - Registered Agent and Office and Registered Agent's Signature

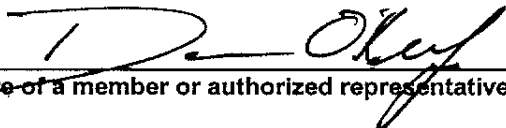
The name and the Florida street address of the registered agent are:

Daniel T. O'Keefe, Esq.
Shutts & Bowen LLP
300 South Orange Avenue, Suite 1000
Orlando, Florida 32801-5403

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, Florida Statutes.



(Registered Agent's Signature)



Signature of a member or 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.

Daniel T. O'Keefe, Authorized Representative
(Typed or printed name of signee)