

LD3000035683

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

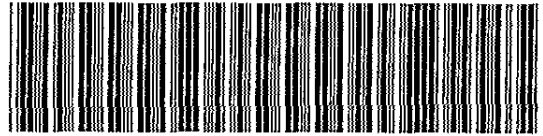
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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09/16/03--01056--021 \*\*375.00

LD3-35683  
CR

Ted Lawrence Williams  
9140 Golfside Drive, suite 11 North  
Jacksonville, (32256)  
FLORIDA  
1.904.739.1553  
September 15th, 2003

Department of State of Florida  
Registration Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

Re: New LLC Filings

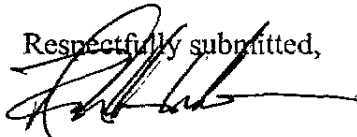
Dear Department of State,

Enclosed for filing, please find an original and one copy of the articles of organization for three new LLCs:

1. Destination Investments, LLC
2. Integrated Investments, LLC, and
3. Spring Creek Properties, LLC

Also enclosed is a money order for one hundred and twenty-five dollars (\$125.00) to pay for the filing of the LLC (\$100.00) and designation of the initial registered agent (\$25.00) for each entity, so a grand total of three-hundred and seventy-five dollars (\$375.00) is enclosed. Please return a copy (non-certified) of the filed articles for each entity, and any other paperwork to me, at the above address. Thank you for your assistance in this matter.

Respectfully submitted,



Ted Lawrence Williams

FILED  
SEP 16 2003  
TALLAHASSEE, FL  
CLERK OF THE COURT

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is: Integrated Investments, LLC

### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:  
9140 Golfside Drive, suite 11 North  
Jacksonville, FLORIDA (32256)

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

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

Ted Lawrence Williams

Name

9140 Golfside Drive, suite 11 North

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

Jacksonville FL (32256)

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

### Article IV - Management (Check box if applicable.)

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

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

Ted Lawrence Williams

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.)

Ted Lawrence Williams, Authorized Agent

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)