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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

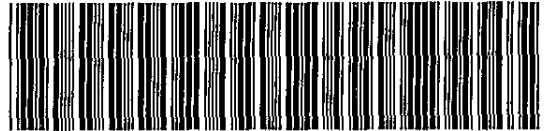
(Business Entity Name)

(Document Number)

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03 OCT 27 AM 10:30
DIVISION OF CORPORATION

FILED
03 OCT 27 PM 12:36
TALLAHASSEE, FLORIDA

**CORPORATE
ACCESS,
INC.**

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

WALK IN

PICK UP 10-27-03 Kelly

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TALLAHASSEE, FLORIDA



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FILING

LLC

1.) Ocala Ashcroft Trust 12,458 LLC
(CORPORATE NAME & DOCUMENT #)

2.) _____
(CORPORATE NAME & DOCUMENT #)

3.) _____
(CORPORATE NAME & DOCUMENT #)

4.) _____
(CORPORATE NAME & DOCUMENT #)

5.) _____
(CORPORATE NAME & DOCUMENT #)

SPECIAL INSTRUCTIONS

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

**ARTICLE I
NAME**

The name of the Limited Liability Company is: OCALA ASHCROFT TRUST 12,458 LLC

**ARTICLE II
ADDRESS**

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

Principal Office Address

2765 White Wing Lane
West Palm Beach, FL 33409-2033

Mailing Address

2765 White Wing Lane
West Palm Beach, FL 33409-2033

**ARTICLE III
REGISTERED AGENT, REGISTERED OFFICE
AND REGISTERED AGENT'S SIGNATURE**

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

Stephen L. Seftenberg
2765 White Wing Lane
West Palm Beach, FL 33409-2033

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 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 65, Florida Statutes.


Registered Agent's Signature

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CLERK OF CIRCUIT COURT
PALM BEACH COUNTY, FLORIDA

**ARTICLE IV
MANGER(S) OR MANAGING MEMBER(S)**

The name and address of each Manager or Managing Member is as follows:


| <u>Title</u> | <u>Name and Address</u> |
|--------------|---|
| MGR | Stephen L. Seftenberg 2765 White Wing Lane West Palm Beach, FL 33409-2033 |

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**ARTICLE V
EFFECTIVE DATE**

The effective date shall be the date these Articles are filed with the Secretary of State of Florida.

REQUIRED SIGNATURE



Stephen L. Seftenberg, authorized representative
of the members