

# L03000051615

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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

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Name	
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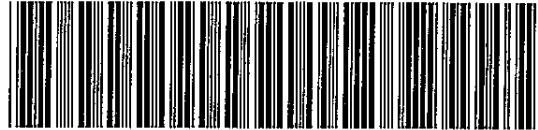
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SCOGGINS & GOODMAN, P.C.

ATTORNEYS AT LAW

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EQUINNELLY@SGPC.COM

FAX  
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November 24, 2003

VIA U.S. MAIL

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

RE: Florida City Vest, LLC

Dear Sir or Madam:

Enclosed please find the following documents for the organization of Florida City Vest, LLC:

1. The original and one (1) copy of the Articles of Organization for the above-referenced limited liability company; and
2. A check made payable to Florida Department of State in the amount of \$125.00 to cover the filing fees for the Articles of Organization and designation of Registered Agent.

Once the documents have been filed, please return a file marked copy to me in the self-addressed, stamped envelope. If you should have any questions or require further information, please do not hesitate to contact me.

Sincerely,



Eloise S. Quinnelly  
Legal Secretary

eq  
Enclosures

cc: Florida City Vest, LLC (Via U.S. Mail w/out encls)  
Robert F. Goodman, Jr., Esq. (w/out encls)

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Florida City Vest, LLC

**ARTICLE II - Address:**

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

6111 Peachtree Dunwoody Road, Suite B-102  
Atlanta, Georgia 30328-4577

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

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

Corporations Services Company

Name

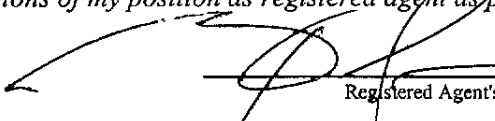
1201 Hays Street

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

Tallahassee, Florida 32301

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 provision 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.*

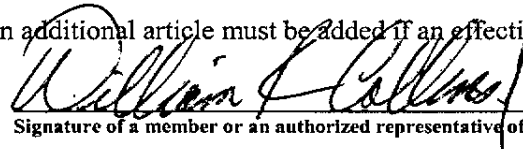
  
**Brian Courtney**  
**Asst. V. Pres.**  
Registered Agent's Signature

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**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)

  
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.)

William R. Collins, Jr.

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)