

FROM: HOLLAND AND KNIGHT

FAX TO: (407) 244-5288

12-19-03 01:17P P.01

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Florida Department of State  
Division of Corporations  
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Division of Corporations  
Fax Number : (850) 205-0383

From:

Account Name : HOLLAND & KNIGHT  
Account Number : 075350000340  
Phone : (407) 425-8500  
Fax Number : (407) 244-5288

**LIMITED LIABILITY COMPANY**

**Boyd Moss Park LLC**

Certificate of Status	0
Certified Copy	0
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TALLAHASSEE, FL 32304

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DIVISION OF CORPORATION

*JB*  
*12-19-03*

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I – Name:**

The name of the Limited Liability Company is: Boyd Moss Park LLC

**ARTICLE II – Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:  
7586 W. Sand Lake Road, Orlando, Florida 32819

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

The name and the Florida street address of the registered agent are:  
Scott T. Boyd, 7586 W. Sand Lake Road, Orlando, Florida 32819

*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)

  
\_\_\_\_\_  
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 and affirmation under the penalties of perjury that the facts stated herein are true.)

Scott T. Boyd

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)

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