

L03000056211

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

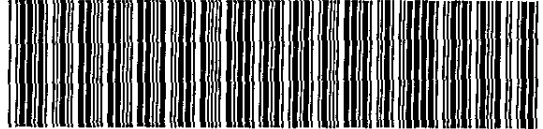
(Business Entity Name)

(Document Number)

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

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COMMISSION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

J. BRYAN DEC 29 2003

# McDonald Hopkins

McDonald Hopkins Co., LPA P 216.348.5400  
2100 Bank One Center F 216.348.5474  
600 Superior Avenue, E.  
Cleveland, Ohio 44114 mcdonaldhopkins.com

Direct Dial: 216.348.5459  
E-mail: pmassey@mcdonaldhopkins.com

December 16, 2003

## Federal Express

Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

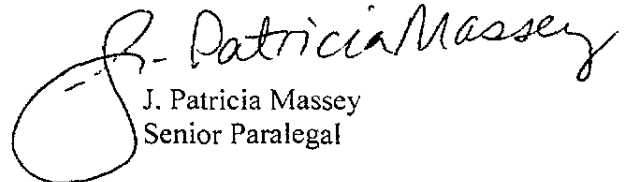
**Re: Morningside Place LLC**

Dear Sir or Madam:

Enclosed are an original and one copy of the Articles of Organization of Morningside Place LLC for filing with the Florida Department of State, Division of Corporations. Please stamp the enclosed copy as filed and return it to me. A check in the amount of \$125.00 is enclosed to cover the filing and designation of registered agent fees.

If you have any questions, please contact me.

Very truly yours,

  
J. Patricia Massey  
Senior Paralegal

copy: Bernard L. Karr, Esq.  
Enclosures

M  
H

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DIV. OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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

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2003 DEC 17 AM 11:58  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Morningside Place LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

1252 Morningside Place

Sanibel, FL 33957

**Mailing Address:**

1252 Morningside Place

Sanibel, FL 33957

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

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

Paul J. Powers

Name

1252 Morningside Place

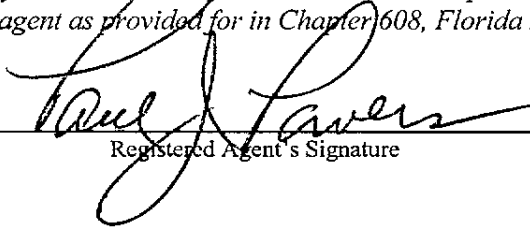
Florida street address (P.O. Box **NOT** acceptable)

Sanibel, FL 33957

FLORIDA

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, Florida Statutes..*

  
\_\_\_\_\_  
Registered Agent's Signature

**ARTICLE IV- Manager(s) or Managing Member(s):**

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

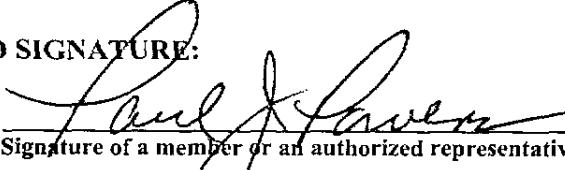
MGRM	Paul J. Powers
	1252 Morningside Place
	Sanibel, FL 33957

(Use attachment if necessary)

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**2003 DEC 17 AM 11:58**  
**DIVISION OF CORPORATIONS**  
**TALLAHASSEE, FLORIDA**

**NOTE: An additional article must be added if an effective date is requested.**

**REQUIRED SIGNATURE:**

  
\_\_\_\_\_  
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.)

Paul J. Powers  
\_\_\_\_\_  
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)