

L03000056211

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

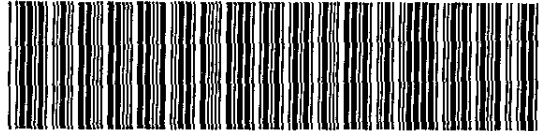
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



100025488801

12/17/03--01027--011 \*\*125.00

FILED  
2003 DEC 17 AM 11:58  
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

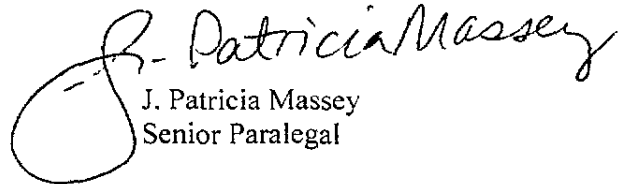
**Re: Morningside Place LLC**

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

FILED  
2003 DEC 17 AM 11:58  
DIV. OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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

FILED  
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

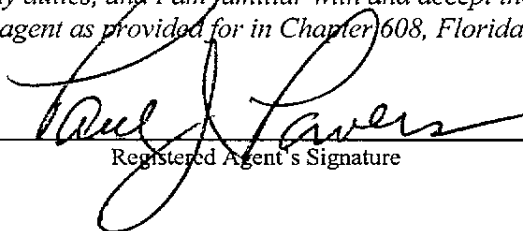
Florida street address (P.O. Box **NOT** acceptable)

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

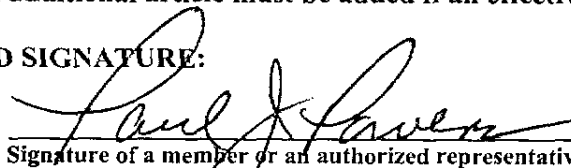
\_\_\_\_\_

\_\_\_\_\_

(Use attachment if necessary)

**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)

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