

L040000000 749

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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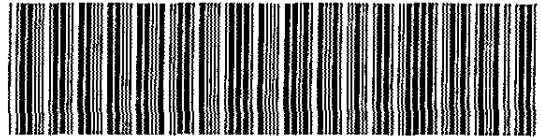
(Business Entity Name)

(Document Number)

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EFFECTIVE DATE

1-2-04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 DEC 26 AM 9:34

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11/6
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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 8301 MULLIGAN CIRCLE PORT ST. LUCIE, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Eugene J. Ward, III
(Name of Person)

EFFECTIVE DATE

1-2-04

Ward, Kenney & Babb
(Firm/Company)

3069 Williston Road
(Address)

South Burlington, VT 05403-6030
(City/State and Zip Code)

For further information concerning this matter, please call:

Eugene J. Ward, III at (802) 863-0307
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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

EFFECTIVE DATE

1-2-04

ARTICLE I - Name:

The name of the Limited Liability Company is:

8301 MULLIGAN CIRCLE PORT ST. LUCIE, LLC

ARTICLE II - Address:

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

Principal Office Address:

137 Iroquois Avenue

Essex Junction, VT 05452

Mailing Address:

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

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

Allen, Lang, Carpenter & Peed, P.A., c/o James F. Basque
Name

14 East Washington Street, Suite 600
Florida street address (P.O. Box **NOT** acceptable)

Orlando FLORIDA 32801
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..

James F. Basque
Registered Agent's Signature

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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

Jeffrey A. Parry

137 Iroquois Avenue

Essex Junction, VT 05452

(Use attachment if necessary)

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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.)

Eugene J. Ward, III, Authorized Representative

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)

ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY

ADDENDUM

8301 MULLIGAN CIRCLE PORT ST. LUCIE, LLC

ARTICLE V - Effective Date:

The effective date of this Limited Liability Company's formation is January 2, 2004.

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TALLAHASSEE, FLORIDA