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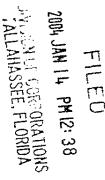
(Requestor's Name)	_		
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PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status	_		
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## TRANSMITTAL LETTER

Division of Corporations  SUBJECT: SHBSEBASTIANPARK,LLC	<u>^</u>
	e of Limited Liability Company)
The enclosed Articles of Organization and f	fee(s) are submitted for filing.
Please return all co	orrespondence concerning this matter to the following:
STEPHEN H. BARNETT	T (Name of Person)  NC.
	(Name of Person)
STEPHEN H. BARNETT, IN	NC.
	(Firm/Company)
7142 NW 66 TERR	
	(Address)
PARKLAND, FLORIDA	33067
	(City/State and Zip Code)
For further information concerning this mat	tter, please cali:
STEPHEN BARNETT	at ( 561 ) 953-1421
(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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

MIN THE SECONDARY	, EO 38
ABOX.	'n

ARTICLE I - Name:	· 100
The name of the Limited Liability Company	y is:
SHBSEBASTIANPARK, LLC	7
ARTICLE II - Address:	
The mailing address and street address of th	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7142 NW 66 TERR.	7142 NW 66 TERR
PARKLAND, FLORIDA 33067	PARKLAND, FLORIDA 33067
<u> </u>	
ARTICLE III - Registered Agent, Registe	ered Office, & Registered Agent's Signature:

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

STEPHEN H. BARNET	Τ
	Name
7142 NW 66 TERR	
Florida street addr	ess (P.O. Box NOT acceptable)
PARKLAND	FLORIDA 33067
City	State, and Zin

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

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Man The name and address of each Manag	aging Member(s): er or Managing Member is as follows:	Sal Maria See Toplogs
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	A CONTRACTOR OF THE STATE OF TH
MGR	STEPHE <u>N H</u> . BAR <u>NETT</u> 7142 NW 66 TERR PARKLAND, FLORIDA 33067	
**************************************		· · · · · · · · · · · · · · · · · · ·
(Use attachment if necessary)		·
REQUIRED SIGNATURE:	be added if an effective date is requeste  n authorized representative of a member.	d. 
(In accordance with section 6	508.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury	

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

STEPHEN H. BARNETT

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee