

L04000023184

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

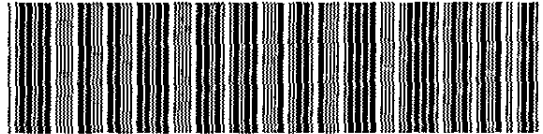
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



300030832573

03/26/04 -01058--005 \*\*125.00

**FILED**  
04 MAR 26 PM 12:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
**RECEIVED**  
04 MAR 26 AM 11:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Handwritten signature/initials*

CT CORPORATION

March 26, 2004

Secretary of State, Florida  
409 East Gaines Street  
Tallahassee FL 32399

FILED  
04 MAR 26 PM 12:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Re: Order #: 6067386 SO  
Customer Reference 1:  
Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

Magnolia Green 3 LLC (FL)  
Formation  
Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Ashley A Mitchell  
Fulfillment Specialist  
Ashley\_Mitchell@cch-lis.com

660 East Jefferson Street  
Tallahassee, FL 32301  
Tel. 850 222 1092  
Fax 850 222 7615

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

**FILED**  
04 MAR 26 PM 12:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Magnolia Green 3 LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

8430 Enterprise Circle, Suite 130  
Bradenton, FL 34202

**Mailing Address:**

710 N. Plankinton Avenue, Suite 1200  
Milwaukee, WI 53203

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

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

C T Corporation System

Name

1200 South Pine Island Road

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

Plantation

FLORIDA 33324

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..*

C T Corporation System

By: Connie Bryson

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

MJM Partnership LLP

710 N. Plankinton Avenue, Suite 1200

Milwaukee, WI 53203

MGRM

LAACA LLP

710 N. Plankinton Avenue, Suite 1200

Milwaukee, WI 53203

MGRM

H.S. Development, Inc.

1335 Second Street

Sarasota, FL 34236

MGRM

SMR/MG3 LLC

c/o Schroeder-Manatee Ranch, Inc.

Attn: Rex E. Jensen, President

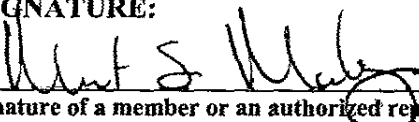
6215 Lorraine Road

Bradenton, FL 34202

(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.)

Mark S. Madigan, Authorized Representative of MJM Partnership LLP  
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)**