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Florida Department of State

Division of Corporations
Public Access System

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To:

Division of Corporations

Fax Mumber

: (850)205-0383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)222-9428 SECRETARY OF STATE OF THE OFFICE OFFICE OF THE OFFICE OFFI

LIMITED LIABILITY COMPANY

Baumgartner Florida Properties, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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ISION OF COMPONIES

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company i	is:
Baumgartner Florida Properties, LLC	
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
475 Cottonwood Place	Same
McKinney, Texas 75069	
	red Office, & Registered Agent's Signature:
The name and the Florida street address of the	
	oration System
Nam	-
14311	
1200 Sout	th Pine Island Road ASSE
1200 Sout	th Pine Island Road P.O. Box NOT acceptable) AFFING T

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

Page1 of 2 (CONTINUED) 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

MGR

Theodore J. Saumgartner

475 Cottonwood Place

McKinney, Texas 75089

MGR

Pairicla Baumgartner

475 Cottonwood Place

McKinney, Texas 75089

(Use attachment if necessary)

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

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.)

Theodore J. Saumgariner
Typed or printed name of signes

Filing Feer:

\$100.00 Filing Fee for Articles of Organization

S 25.66 Designation of Registered Agent

5 30.00 Certified Copy (Optional)

5 5.00 Cartificate of Status (Optional)

SECRETARY OF STAIL TALLAHASSEE, FLORID,

FLED