

Division of Corporations
Public Access System

2004 APR -6 A 9: 26

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H04000072451 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : GRAHAM, CLARK, JONES, BUILDER, PRATT & MARKS

Account Number : I19990000278
Phone : (407)647-4455
Fax Number : (407)740-7063

APR-E AMOS 21

LIMITED LIABILITY COMPANY

MARSH POINTE, LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

AL

Electronic Filing Menu

Corporate Filing

Public Access Help

ARTICLES OF ORGANIZATION OF MARSH POINTE, LLC

FILED

2004 APR -6 A 9:26

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby makes, acknowledges, and files the fibriowing Articles of TE Organization.

ARTICLE I - NAME

The name of the limited liability company shall be MARSH POINTE, LLC ("Company").

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Company is: 71 East Church Street, Orlando, Florida 32801.

ARTICLE III - DURATION

The Company shall commence its existence as of April 2, 2004. The Company's existence shall be perpetual unless the Company is earlier dissolved as provided in these Articles of Organization or in applicable law.

ARTICLE IV - REGISTERED OFFICE AND AGENT

The name and street address of the registered agent of the Company in the State of Florida is James R. Pratt, Esquire, 369 N. New York Avenue, 3rd floor, Winter Park, Florida 32789.

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, F.S.

H040000724513

UNIXADECLE PATRICIONAL PRIME, LLC Decelor de Comprise des

FILED

Organizer:

SECRETARY OF STATE TALLAHASSEE, FLORIDA

By: James & Real authorized representative

STATE OF FLORIDA COUNTY OF ORANGE

Before me personally appeared James R. Pratt, personally known to me to be the authorized representative of the above limited liability company and who subscribed the above Articles of Organization.

IN WITNESS WHEREOF, I have set my hand and affixed my official seal this 5_ day of April, 2004.

NOTARY PUBLIC

Print Name:

State of Florida at Large

MY COMMISSION EXPIRES:

LINGGOOK/CLEINT/Cites/March Foling, LLOCOCK/Artikles Organization.doc