

L 040000 49390

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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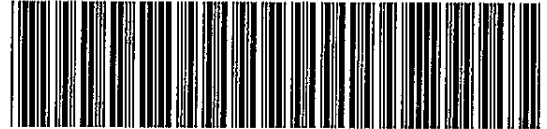
(Business Entity Name)

(Document Number)

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DEPT. OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

*[Handwritten signature]*



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 787390 82497A

AUTHORIZATION : *Patricia Pizoto*

COST LIMIT : \$ 155.00

FILED  
04 JUL - 1 PM 5:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ORDER DATE : July 1, 2004

ORDER TIME : 10:44 AM

ORDER NO. : 787390-005

CUSTOMER NO: 82497A

CUSTOMER: Ms. Barbara Gibson  
R. Patrick Mirk, P.a.

Suite 100  
106 S. Tampania Avenue  
Tampa, FL 33609

DOMESTIC FILING

NAME: MONTPELIER, LLC

EFFECTIVE DATE:

\_\_\_\_ ARTICLES OF INCORPORATION  
\_\_\_\_ CERTIFICATE OF LIMITED PARTNERSHIP  
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
\_\_\_\_ PLAIN STAMPED COPY  
\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward - EXT. 2935

EXAMINER'S INITIALS: \_\_\_\_\_

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

**FILED**  
04 JUL - 1 PM 5:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Montpelier, LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

106 S. Tampania Avenue, Suite 100

Tampa, Florida 33609

**Mailing Address:**

106 S. Tampania Avenue, Suite 100

Tampa, Florida 33609

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

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

R. Patrick Mirk, Esquire

Name

106 S. Tampania Avenue, Suite 100

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

Tampa

FLORIDA 33609

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..*

R. Patrick Mirk

Registered Agent's Signature

R. PATRICK MIRK, ESQUIRE

**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

J. P. Motley

38-11 Ditmars Blvd., #375

Astoria, New York 11105

MGRM

Frank C. Bragano

4725 N. Hesperides Street

Tampa, Florida 33614

(Use attachment if necessary)

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

**REQUIRED SIGNATURE:**

x

 6/28/04  
\_\_\_\_\_  
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.)

\_\_\_\_\_  
Typed or printed name of signer

FRANK C. BRAGANO, CO-MANAGING MEMBER

**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)**