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ACCOUNT NO. : 072100000032

REFERENCE: 820444

9666A

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE: July 26, 2004

ORDER TIME: 10:58 AM

ORDER NO. : 820444-005

CUSTOMER NO: 9666A

CUSTOMER: Tim Haines, Esq

Gray, Ackerman & Haines, P.a.

Suite 1

125 Ne First Avenue Ocala, FL 34470-6675

DOMESTIC FILING

NAME:

MEADOWBROOK OFFICE ONE, LLC

EFFECTIVE DATE:

	ARTICLES	OF	INCORPORATION		
	CERTIFICA	TE	OF	LIMITED	PARTNERSHIP
<u>XX</u>	ARTICLES	OF	ORG	GANIZATIO	N

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

__ CERTIFIED COPY __ PLAIN STAMPED COPY ___ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea - EXT. 2914

EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR MEADOWBROOK OFFICE ONE, LLC A FLORIDA LIMITED LIABILITY COMPANY



ARTICLE I. NAME

The name of the Limited Liability Company is "Meadowbrook Office One, LLC" (the "Company").

ARTICLE II. ADDRESS

The mailing address and street address of the principal office of the Company is 1700 SE 17th Street, Suite 300, Ocala, Florida 34471.

ARTICLE III. DURATION

The period of duration for the Company shall be perpetual unless the Company is earlier dissolved in accordance with either the provisions of the *Florida Limited Liability Company Act*, Sections 608.401 through 608.514 of the *Florida Statutes Annotated* (the "Act") or the Company's Operating Agreement among the members (the "Operating Agreement").

ARTICLE IV. MANAGEMENT

The Limited Liability Company is to be managed by a manager.

ARTICLE V. PURPOSE

The purpose for which the Company is being organized is to acquire and develop, whether in its own capacity or as a joint venture partner, commercial real property, including for office, retail or other commercial uses, and thereafter to manage the same, and ultimately to resell the same, and to transact any other lawful business approved by the members of the Company and for which a limited liability company may be formed under the laws of the State of Florida.

ARTICLE VI. MEMBERS' RIGHTS TO CONTINUE BUSINESS

The right of the remaining members of the Company to continue the business on the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Company shall be upon the consent of all of the remaining members in accordance with the terms and conditions of

ARTICLES OF ORGANIZATION FOR MEADOWBROOK OFFICE ONE, LLC A FLORIDA LIMITED LIABILITY COMPANY

Page 2 of 2

the Operating Agreement to continue the business of the Company, provided that there is at least one (1) remaining member.

ARTICLE VII. <u>AMENDMENTS</u>

The Company reserves the right to amend, alter, change or repeal any provision contained in these Articles of Organization, in the manner now or hereafter prescribed by the Act.

IN WITNESS WHEREOF, the undersigned, being one of the members of the Company, has hereunto set his hand this 3 day of July STATE OF FLORIDA

COUNTY OF MARION

The foregoing ARTICLES OF ORGANIZATION was acknowledged before me by ROY T. BOYD III, as a member of the above named limited liability company, who is personally known to me,

SHARON L. OLIVER NOTARY PUBLIC, STATE OF FLORIDA COMMISSION NO. DD 007231 MY COMMISSION EXPIRES MAR. 31, 2005

Print Name: 2/2/100 Notary Public, State of Florida Commission number PPCO Commission expires 3.3

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: Meadowbrook Office One, LLC.
- 2. The name and address of the registered agent and office is:

Roy T. Boyd III 1700 SE 17th Street, Suite 300 Ocala, FL 34471

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.

ROMT. BOYD IN

Date: 52 2004