

AUG-03-2004 11:21

W4000057603

P.01

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

5
\$3 FUC

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.

((H04000157224 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

MJH

To:

Division of Corporations
Fax Number : (850)205-0383

From:

Account Name : NASON, YEAGER, GERSON, WHITE & LIOCE, P.A.
Account Number : 073222003555
Phone : (561) 686-3307
Fax Number : (561) 686-5442

04 AUG -3 AM 11:11
STATE
FLORIDA

FILED

LIMITED LIABILITY COMPANY

DUVAL ROAD LAND BANK, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing

Public Access Help

Return
to
BEP



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

August 3, 2004

NASON, YEAGER, GERSON, WHITE & LIOCE, P.A.

SUBJECT: DUVAL ROAD LAND BANK, LLC
REF: W04000029517

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Written approval and clearance of the terms BANK, BANKER, BANKING, TRUST COMPANY, BANCSHARES, SAVINGS & LOAN ASSOCIATION, SAVINGS BANK, or CREDIT UNION or words of similar import, must be obtained from the Office of Financial Institutions, pursuant to section 655.922(2a), Florida Statutes.

Enclosed is a "Name Approval Request" form to be filled out and sent to the address indicated on the form. If the proposed name is approved by the Office of Financial Institutions, resubmit the document and approval letter to the Division of Corporations for filing.

Please return your document, along with a copy of this letter, within 30 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Michelle Hodges
Document Specialist

FAX Aud. #: H04000157224
Letter Number: 204A00048295

RECEIVED
AUG-3-2004 11:25
DIVISION OF CORPORATIONS

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

**ARTICLES OF ORGANIZATION
OF
DUVAL ROAD LAND, LLC**

I, the undersigned authorized representative of the Member, hereby make, acknowledge and file these Articles of Organization for the purpose of forming a limited liability company under the laws of the State of Florida.

**ARTICLE I
NAME**

The name of this Limited Liability Company is:

DUVAL ROAD LAND, LLC

**ARTICLE II
ADDRESS**

The mailing address of the principal office is:

7602 Marblehead Lane
Parkland, Florida 33067

**ARTICLE III
DURATION**

The period of duration for the Limited Liability Company shall be perpetual.

**ARTICLE IV
MANAGEMENT**

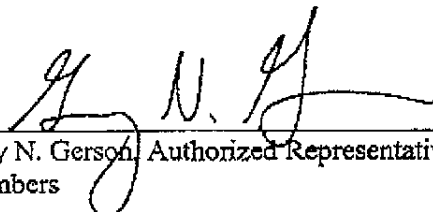
The powers of the Limited Liability Company shall be exercised by or under the authority of, and the business and affairs of the Limited Liability Company shall be managed under the direction of its Managers and is, therefore, a manager-managed company.

FILED
04 AUG -3 AM 11:11
SEAL OF THE STATE
TALLAHASSEE FLORIDA

ARTICLE V
ADMISSION OF ADDITIONAL MEMBERS

The sole Member shall have the right to admit additional members.

IN WITNESS WHEREOF, the undersigned authorized representative of the Members has made and subscribed these Articles of Organization at West Palm Beach, Florida, for the uses and purposes aforesaid, this 30th day of July, 2004.



Gary N. Gerson, Authorized Representative of the
Members

H04000157224 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 TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN
THE STATE OF FLORIDA.

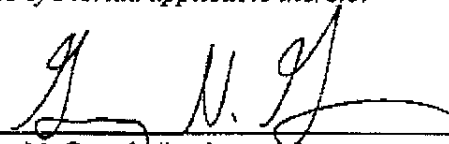
1. The name of the Limited Liability Company is:

DUVAL ROAD LAND, LLC

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

Gary N. Gerson
1645 Palm Beach Lakes Blvd.
Suite 1200
West Palm Beach, Florida 33401

Having been named as registered agent to accept service of process for the above-stated limited liability company, at the location designated herein, I hereby consent to and accept the appointment to act in this capacity, acknowledge that I am familiar with and accept the obligations of a registered agent and agree to comply with the laws of Florida applicable thereto.



Gary N. Gerson, Registered Agent