

L040000 60525

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

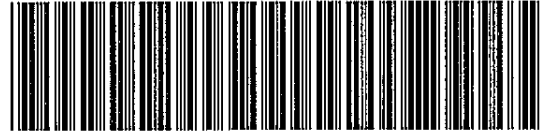
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200038729402

FILED
04 AUG 16 AM 7:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
04 AUG 16 PM 4:14
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 850010 80457A

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE : August 16, 2004

ORDER TIME : 3:36 PM

ORDER NO. : 850010-005

CUSTOMER NO: 80457A

CUSTOMER: Random R. Burnett, Esq
Black, Sims, Burnett And
Birch, L.l.p.
3rd Floor
501 North Grandview Avenue
Daytona Beach, FL 32118

DOMESTIC FILING

NAME: HIDDEN OAK FLAGLER, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Justin Cheshire - EXT. 2909

EXAMINER'S INITIALS: _____

Patricia
FILED
AUG 16 AM 7:58
CLERK OF STATE
FLORIDA

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

HIDDEN OAK FLAGLER, LLC**ARTICLE II - Address:**

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

Principal Office Address:1221 Dunlawton AvenueSuite 200Port Orange, FL 32119**Mailing Address:**1221 Dunlawton AvenueSuite 200Port Orange, FL 32119**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

Random R. Burnett

Name

501 N. Grandview Avenue, 3rd Floor EastFlorida street address (P.O. Box **NOT** acceptable)Daytona BeachFLORIDA 32118

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..



Registered Agent's Signature

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:MGRMJerry S. Johnson, Sr.1221 Dunlawton Avenue, Suite 200Port Orange, FL 32119MGRMDipak Jobalia1221 Dunlawton Avenue, Suite 200Port Orange, FL 32119MGRMJames W. Paytas, Jr.1221 Dunlawton Avenue, Suite 200Port Orange, FL 32119

(Use attachment if necessary)

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

Random R. Burnett, Authorized Representative

Typed or printed name of signer

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)