## L04000061464

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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ON SERVICE COMPANY.	
ACCOUNT NO.: 072100000032	
REFERENCE: 854715 156480A	
AUTHORIZATION: Tatricia typus	ى <del>س</del> ىر.
COST LIMIT : \$ 125.00	
ORDER DATE: August 19, 2004	THE SECOND
ORDER TIME : 11:51 AM	
ORDER NO. : 854715-005	
CUSTOMER NO: 156480A	P
CUSTOMER: Ms. Layla Tabor Roberts, Seward & Company	
Suite 202 505 E. Jackson Street Tampa, FL 33602	-
<u> DOMESTIC FILING</u>	-
NAME: IMPACT PROPERTIES X, LLC	
EFFECTIVE DATE:	
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	2 <del>7</del>
CERTIFIED COPY  PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING	

EXAMINER'S INITIALS:

CONTACT PERSON: Sara Lea - EXT. 2914

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY



ARTICLE I - Name: The name of the Limited Liability Company is:	· Contraction
Impact Properties I, UC	
ARTICLE II - Address: The mailing address and street address of the principal	al office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
71027 Courtney Campbell CSWY.	The Transport Compact CSW)
Jampa, Florida 33 aD7	Tampa, Florida. 33607

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

Name

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

Tampa FLORIDA 331007.

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

Page 1 of 2 (CONTINUED)

LOCATION:

•	
ARTICLE IV- Manager(s) or Managin The name and address of each Manager of	ng Member(s):
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Managing Member is as follows:  Name and Address:  Nash Kanji  Too Courtey Campball Cauxway
MGR	Nash Kanji Test Contray Campball Consumy Tampa, FL
(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE:	<b>7</b>
	a second
Signature of a member or an au	thorized representative of a member.
(In accordance with section 608, of this document constitutes an at that the facts stated herein are true	408(3), Florida Statutes, the execution Firmation under the penalties of perjury e.)
Nash Kanji	stad pame of cionea

Filing Fees: \$100.00 Filing Fee for Articles of Organization

S 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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