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To:

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From:

Account Name

: SMITH, GAMBRELL & RUSSELL LLP

Account Number: I20020000143

: (404)815-3538

Phone Fax Number

: (904)598-6300

4 SEP -8 PM 2: 21

## LIMITED LIABILITY COMPANY

M Street Condominiums, LLC

Certificate of Status	0
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Page Count	03
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9/8/2004

## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT; M Street Condominiums, LLC	<u> </u>
(Name of Limited Liability Company)	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Rebecca Saferstein, Paralegal	_
(Name of Person)	-
Smith, Gambrell & Russell, LLP	
(Firm/Company)	
Suite 3100, Promenade II, 1230 Peachtree St., N.E.	·
(Address)	
Atlanta, Georgia 30309-3592	_
(City/State and Zip Code)	•
For further information concerning this matter, please call:	
Rebecca Saferstein at ( 404 ) 815-3721	=
(Name of Person) (Area Code & Daytime Telephone Number)	
	4 0

STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 SEP -8 AMIO: 32

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SMITH GAMBRELL AND RUSSEL

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

M Street Condominiums, LLC	
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
100 Atlante Technology Center, Suite 200	100 Atlanta Technology Center, Suite 200
1575 Northside Drive, NW	1575 Northeide Drive, NW
Atlanta, Georgie 30318	Atlanta, Georgia 30318
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the r  Douglas G. Stanford  Name	registered agent are:
The name and the Florida street address of the r  Douglas G. Stanford  Name  50 North Laura Street. Suite 2	egistered agent are: 600, Bank of America Tower
The name and the Florida street address of the r  Douglas G. Stanford  Name	egistered agent are: 600, Bank of America Tower D. Box <u>NOT</u> acceptable)
The name and the Florida street address of the r  Douglas G. Stanford  Name  50 North Laura Street, Suite 2  Florida street address (P.C.	egistered agent are: 600, Bank of America Tower D. Box <u>NOT</u> acceptable)
The name and the Florida street address of the r  Douglas G. Stanford  Name  50 North Laura Street, Suite 2  Florida street address (P.C.	FLORIDA 32202  The process for the above stated limited liability by accept the appointment as registered again and in the provisions of all statutes relating to the proper r with and accept the obligations of my position as

Page 1 of 2 (CONTINUED) Name and Address:

Title:

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

MGR		Julian LeCraw and Company, LLC
		1575 Northside Drive, NW, 100 ATC, Suite 200
		Atlanta, Georgia 30318
<u> </u>	· •	<del></del>
	-	
		<u> </u>
		g es
-		

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 perjuty that the facts stated herein are true.)

Michael E. Rubinger, Authorized Representative
Typed or printed name of signee

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)

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