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(Requestor's Name)	-
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(Address)	
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(Address)	
(City/State/Zip/Phone #)	-
<b>.</b>	
PICK-UP WAIT MAIL	
(Business Entity Name)	-
(Document Number)	-
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TALLAHASSET FLORID





ACCOUNT NO. : 072100000032

REFERENCE: 947790 7448543

AUTHORIZATION : ~

OST LIMIT : \$ 125.0

ORDER DATE: October 28, 2004

ORDER TIME : 5:04 PM

ORDER NO. : 947790-005

CUSTOMER NO: 7448543

CUSTOMER: Alicia Gayton

Benderson Development Co.,

Inc.

8441 Cooper Creek Blvd.

University Park, FL 34201

DOMESTIC FILING

NAME: I-75/LEE ASSOCIATES, LLC

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman - EXT. 2908

EXAMINER'S INITIALS:

A CO PHIC 28

ARTICLE I - Name:

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

WOCT 20 PHID: 28

The name of the Limited Lizbility Company is:	7
I-75/LEE ASSOCIATES, LLC	
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
8441 COOPER CREEK BLYC	GAME
UNIVERSITY PARK, FL	
34201	

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

8441 COOPER CREEK BIND

UNIVERSITY PARK FLORIDA (3420/

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)

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

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

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
<u>mgr</u>	DAVID H. BALDANF BUYL COOPER CREEK BLUD UNIVERSITY PARK, FT. 3420
(Use attachment if necessary)	
NOTE: An additional article must	be added if an effective date is requested.
REQUIRED SIGNATURE:	
Signature of a member or a	authorized representative of a member.
(In accordance with section 6 of this document constitutes a that the facts stated herein are	08.408(3), Florida Statutes, the execution in affirmation under the penalties of perjury true.)
ALICIA L	GALTON

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)

Typed or printed name of signee