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04 NOV -3 PM 3:50

SUBJECT: STATE  
TALLAHASSEE, FLORIDA

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06 NOV -3 PM 2:48

SUBJECT: STATE  
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 947926 3487A

AUTHORIZATION :

*Patricia P. Smith*

COST LIMIT : \$ 160.00

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04 NOV -3 PM 3:50  
SEALY STATE  
TALLAHASSEE, FLORIDA

ORDER DATE : October 28, 2004

ORDER TIME : 1:36 PM

ORDER NO. : 947926-005

CUSTOMER NO: 3487A

CUSTOMER: Ms. Carol Deblasio  
Icard Merrill Cullis Timm  
Furen & Ginsburg, Pa  
Suite 600  
2033 Main Street  
Sarasota, FL 34237

DOMESTIC FILING

NAME: GRAN PARADISE I, LLC

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan - EXT. 2955

EXAMINER'S INITIALS: \_\_\_\_\_

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Gran Paradiso I, LLC

ARTICLE II - Address:

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

Principal Office Address:

1265 Horse & Chaise Boulevard  
Venice, Florida 34285

Mailing Address:

1265 Horse & Chaise Boulevard  
Venice, Florida 34285

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Sam R. Rodgers

Name

1265 Horse & Chaise Boulevard

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

Venice, Florida 34285

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, F.S..*

  
Registered Agent's Signature

(CONTINUED)

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STATE  
TALLAHASSEE, FLORIDA

**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:**

MGR

Sam R. Rodgers

1265 Horse & Chaise Boulevard

Venice, Florida 34285

MGR

Mary A. Rodgers

1265 Horse & Chaise Boulevard

Venice, Florida 34285

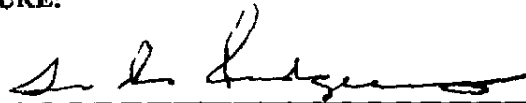
 

(Use attachment if necessary)

**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.)

Sam R. Rodgers

Typed or printed name of signer

**Filing Fees:**

\$125.00 Filing Fee for Articles of Organization and Designation  
of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)