

Division of Corporations

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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Cody Waters
Account Name : FOWLER, WHITE 2
Account Number : IL9990000148
Phone : (813) 228-7411
Fax Number : (813) 228-9401

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104-271

LIMITED LIABILITY COMPANY

IDEAL VENTURES X, LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

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**ARTICLES OF ORGANIZATION OF
IDEAL VENTURES X, LLC**

I hereby file these Articles of Organization as an authorized representative of the limited liability company to be formed pursuant to these Articles of Organization and the laws of the State of Florida.

**ARTICLE I
NAME**

The name of the limited liability company to be formed hereunder is "Ideal Ventures X, LLC".

**ARTICLE II
MAILING ADDRESS AND STREET ADDRESS**

The mailing address of the principal office of the limited liability company is P.O. Box 1466, Tampa, Florida 33601. The street address of the principal office of the limited liability company is 3325 West Wallcraft Avenue, Tampa, Florida 33611.

**ARTICLE III
REGISTERED OFFICE AND REGISTERED AGENT**

The street address of the limited liability company's initial registered office in Florida is 501 East Kennedy Blvd., Suite 1700, Tampa, FL 33602, and the name of its initial registered agent is Cody W. Waters.

**ARTICLE IV
MANAGEMENT**

The limited liability company is a manager-managed company.

IN WITNESS THEREOF, the undersigned has executed these Articles of Organization this 9th day of November, 2004.


Cody W. Waters, Authorized Representative

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ACCEPTANCE BY REGISTERED AGENT

Having been appointed the registered agent of Ideal Ventures X, LLC, the undersigned accepts such appointment, agrees to act in such capacity and accepts the obligations proposed by Florida Statutes Section 608.415 and is herewith simultaneously designated as registered agent.

Executed this 9th day of November, 2004.


Cody W. Waters

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