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ACCOUNT NO. : 072100000032

REFERENCE :

011093

AUTHORIZATION:

COST LIMIT : \$ 125.00

ORDER DATE: November 29, 2004

ORDER TIME: 9:55 AM

ORDER NO. : 011093-005

CUSTOMER NO: 80457A

CUSTOMER: Random R. Burnett, Esq

Black, Sims, Burnett And

Birch, L.l.p. 3rd Floor

501 North Grandview Avenue Daytona Beach, FL 32118

DOMESTIC FILING

NAME: WESTVIEW PLACE, LLC

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Amanda Haddan - EXT. 2955

EXAMINER'S INITIALS:

ARTICLE I - Nar The name of the Li	ne: imited Liability Compa	iny is:	755Kr. Cr. Cr. Cr. Cr. Cr. Cr. Cr. Cr. Cr. C
WESTVIEW PLACE	, LLC		- (0)(P)
_	ss and street address of	the principal office of the Limited Liability	マ Compan
	daress:	Mailing Address:	
Principal Office A	1441 4551		
1 Mystic Lake Way	-	P.O. Box 9297	
1 Mystic Lake Way Ormond Beach, FL 3	32174		 ature:
1 Mystic Lake Way Ormond Beach, FL 3 ARTICLE III - R	32174 egistered Agent, Regi Florida street address o	P.O. Box 9297 Daytona Beach, FL 32120	ature:
1 Mystic Lake Way Ormond Beach, FL 3 ARTICLE III - R	32174 egistered Agent, Regi	P.O. Box 9297 Daytona Beach, FL 32120 stered Office, & Registered Agent's Signs	ature:
1 Mystic Lake Way Ormond Beach, FL 3 ARTICLE III - R	32174 egistered Agent, Regi Florida street address o	P.O. Box 9297 Daytona Beach, FL 32120 stered Office, & Registered Agent's Signs f the registered agent are:	ature:
1 Mystic Lake Way Ormond Beach, FL 3 ARTICLE III - R	egistered Agent, Regi Florida street address o Barry D. Larkins	P.O. Box 9297 Daytona Beach, FL 32120 stered Office, & Registered Agent's Signs f the registered agent are:	ature:
1 Mystic Lake Way Ormond Beach, FL 3	egistered Agent, Regi Florida street address o Barry D. Larkins	P.O. Box 9297 Daytona Beach, FL 32120 stered Office, & Registered Agent's Signs f the registered agent are: Name	ature:

(CONTINUED)

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Page 1 of 2

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

• •

A ...

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

MGRM" = Manag	ing Member	
MGRM	_	Barry D. Larkins
		P.O. Box 9297
		Daytona Beach, FL 32120
	_	
	.	
	_	
Use attachment if	necessary)	
OTE: An additi	onal article mus	be added if an effective date is requested.
BOTTOES OFOR	NATURE:	

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.)

Barry D. Larkins

Typed or printed name of signee

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)