Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H04000239366 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Pax Number

: (050)205-0383

From:

Account Name

; C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone

: (050)222-1092

Fax Number

: (850)222-9428

LIMITED LIABILITY COMPANY

North Flagler, 4905, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

Hackropin: Phipp Maph

ARTICLES OF ORGANIZATION

OF

NORTH FLAGLER, 4905, LLC

We, the undersigned, being the Members, hereby make, acknowledge and file these Articles of Organization for the purpose of forming a limited liability company under the laws of the State of Florida.

ARTICLE I

The name of this Limited Liability Company is:

NORTH FLAGLER, 4905, LLC

ARTICLE II ADDRESS

The mailing address and the principal office address is:

2979 PGA Boulevard Palm Beach Gardens, Florida 33410

ARTICLE III DURATION

The period of duration for the Limited Liability Company shall be perpetual.

2034 DEC -3 /K IO: OS SECRETARY OF STATE FALLAHASSEE, FLORIDA

<u>ARTICLE IV</u> <u>MANAGEMENT</u>

The powers of the Limited Liability Company shall be exercised by or under the authority of, and the business and affairs of the Limited Liability Company shall be managed under the direction of its Members and is, therefore, a member-managed company.

ARTICLE V ADMISSION OF ADDITIONAL MEMBERS

The Members shall have the right to admit additional members.

IN WITNESS WHEREOF, the undersigned, the Members, have made and subscribed these Articles of Organization at Palm Beach Gardens, Florida, for the uses and purposes aforesaid, this 1st day of December, 2004.

SANDRA ADAMS, Authorized Representative

of the Members

ECRETANI OF STATE
LLAHASSEE FLOORS

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

NORTH FLAGLER, 4905, LLC

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

Sandra L. Adams 2979 PGA Boulevard Palm Beach Gardens, Florida 33410

Having been named as registered agent to accept service of process for the above-stated limited liability company, at the location designated herein, I hereby consent to and accept the appointment to act in this capacity, acknowledge that I am familiar with and accept the obligations of a registered agent and agree to comply with the laws of Florida applicable thereto.

Sandra L. Adams, Registered Agent

SECREDAKE OF STATE