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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

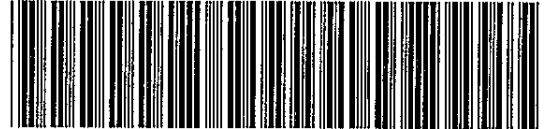
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12/08/04--01035--004 **130.00

12/08/04 PM 3:26

*Ronald D. Sutherland, II
610 Gondoliere Drive
Coral Gables, Florida 33143*

*Tel: 305-788-5388 Fax: 305-668-3600
ron@rdsutherland.com*

December 6, 2004

Registration Section
Division of Corporations
400 E. Gaines Street
Tallahassee, Florida 32399

18A Marlin Lane, LLC

Dear Madam/ Sir:

Enclosed is an application and a check for \$130.00 for forming "18A Marlin Lane, LLC".
Please don't hesitate to call me with any questions you may have.

Thanks you for your assistance.

Ronald D. Sutherland, II



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DEC 10 - 8 P 3 26
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 18A MARLINLANE, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

RONALD D. SUTHERLAND, III
(Name of Person)

(Firm/Company)

610 GONDOLIERE AVE
(Address)

CORAL GABLES, FLA. 33143
(City/State and Zip Code)

For further information concerning this matter, please call:

RONALD SUTHERLAND at (305) 788-5388
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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DIVISION OF CORPORATIONS
SEP 10 2008
P 3:26

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

18A MARLIN LANE, LLC

ARTICLE II - Address:

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

Principal Office Address:

610 GONDOLIERE AVE
CORAL GABLES, FL
33143

Mailing Address:

610 GONDOLIERE AVE
CORAL GABLES, FL
33143

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

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

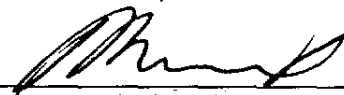
RONALD D. SUTHERLAND, II
Name

610 GONDOLIERE AVE

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

CORAL GABLES, FL 33143
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

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REGISTERED

(CONTINUED)

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

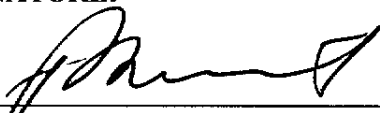
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	<u>Name and Address:</u>
"MGR" = Manager	
"MGRM" = Managing Member	
<u>MGRM</u>	<u>RONALD D. SUTHERLAND, #</u> <u>610 GONDOLIERE AVE</u> <u>CORAL GABLES, FL 33143</u>
<u>MGRM</u>	<u>MARIANN L. SUTHERLAND</u> <u>610 GONDOLIERE AVE</u> <u>CORAL GABLES, FL 33143</u>
<u>MGR</u>	<u>ERIC C. SUTHERLAND</u> <u>555 KENILWORTH AVE</u> <u>KENILWORTH, ILLINOIS 60043</u>
<u>MGR</u>	<u>SUSAN SUTHERLAND</u> <u>555 KENILWORTH AVE</u> <u>KENILWORTH, ILLINOIS 60043</u>

(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.)

RONALD D. SUTHERLAND, #

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)

SECRETARY
TALLAHASSEE, FL
2004 DEC -8 P 3:25