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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

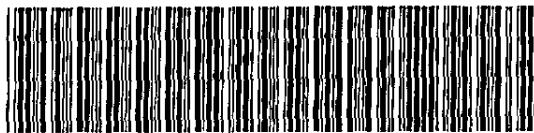
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FLORIDA
CORPORATIONS
TALLAHASSEE, FLORIDA

J. BREWAN JAN 26 2005

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

Van Dyke Crossings, 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:

yvonne SCAGLIONE

(Name of Person)

Van Dyke Partners

(Firm/Company)

218 E. BEARSS Ave #409

(Address)

Tampa Fl 33613

(City/State and Zip Code)

For further information concerning this matter, please call:

yvonne SCAGLIONE at 813 , 908-2211

(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
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
Of
VAN DYKE CROSSINGS, LLC**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby make, acknowledge, and file the following Articles of Organization.

ARTICLE I – NAME

The name of this limited liability company shall be:

VAN DYKE CROSSINGS, LLC.

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ALLAHASSEE, FLORIDA
ARTICLES OF ORGANIZATION

ARTICLE II – ADDRESS

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

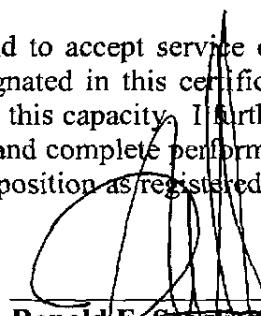
218 East Bearss Avenue # 409
Tampa, FL 33613

**ARTICLE III – REGISTERED AGENT, REGISTERED OFFICE &
REGISTERED AGENT'S SIGNATURE**

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

Ronald E. Scaglione
218 East Bearss Avenue # 409
Tampa, FL 33613

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.


Ronald E. Scaglione as Registered Agent

ARTICLE IV – MANAGEMENT

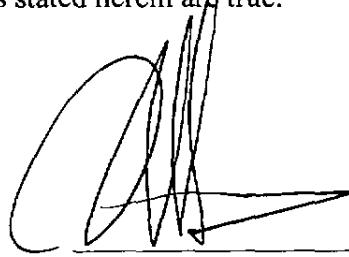
The Limited Liability Company is to be managed by one manager.

ARTICLE V – EFFECTIVE DATE

The effective date of this Limited Liability Company shall be the date of filing these articles with the Secretary of State of Florida.

In accordance with §608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Dated Jan 7, 2005.



RONALD E. SCAGLIONE,
Managing Member

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JIMMY J. CORPORAIONS
ALLAHASSEE, FLORIDA