

L05000009905

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

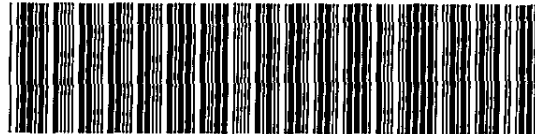
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DIVISION

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DIVISION



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 175688 4355221

AUTHORIZATION :

Patricia Piquito

COST LIMIT : \$ 160.00

ORDER DATE : January 31, 2005

ORDER TIME : 2:44 PM

ORDER NO. : 175688-005

CUSTOMER NO: 4355221

CUSTOMER: Ms. Clara Scocozzo
Collins Brown Caldwell
Barkett & Garavaglia
756 Beachland Boulevard

Vero Beach, FL 32963

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TALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: HIGHLAND LIGHT PROPERTIES, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea - EXT. 2914

EXAMINER'S INITIALS: _____

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Highland Light Properties, LLC

ARTICLE II - Address:

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

Principal Office Address:

5050 Fairways Circle

Apt. 207

Vero Beach, FL 32967

Mailing Address:

5050 Fairways Circle

Apt. 207

Vero Beach, FL 32967

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

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

DEAN J. SPOSATO

Name

5050 Fairways Circle - Apt. 207

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

Vero Beach FL 32967

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

(CONTINUED)

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TALLAHASSEE, FLORIDA

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

DEAN J. SPOSATO

MGRM

KRISTIN A. SPOSATO

(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.)

Dean J. Sposato

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)