

L 05000011249

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500045697815

FILED

05 FEB -3 AM 10:48

FALLS CHURCH, VIRGINIA

RECEIVED

05 FEB -3 AM 8:54

FALLS CHURCH, VIRGINIA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 181859 7272121

AUTHORIZATION :

Patricia Pyle

COST LIMIT : \$ 160.00

ORDER DATE : February 2, 2005

ORDER TIME : 5:06 PM

ORDER NO. : 181859-005

CUSTOMER NO: 7272121

CUSTOMER: Gail Candela, Corp Paralegal
Field And Goldberg, Llc

Suite 2910
10 S. Lasalle Street
Chicago, IL 60603

FILED
05 FEB - 3 AM 10:48
TALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: VIAGER MANAGER 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: _____

05 FEB -3 AM 10:48
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

VIAGER MANAGER LLC

ARTICLE II - Address:

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

Principal Office Address:

19540 Planters Point Drive
Boca Raton, FL 33434

Mailing Address:

19540 Planters Point Drive
Boca Raton, FL 33434

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

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

CORPORATION SERVICE COMPANY

Name

1201 HAYS STREET

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

TALLAHASSEE, FL 32301

FL

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..

Deborah D. Skipper

Registered Agent's Signature

Deborah D. Skipper
Asst. V. Pres.

(CONTINUED)

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

RICHARD KARYO


19540 Planters Point Drive

Boca Raton, FL 33434

(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.)

JAY R. GOLDBERG, AUTHORIZED REPRESENTATIVE

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)