

L050000/3498

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

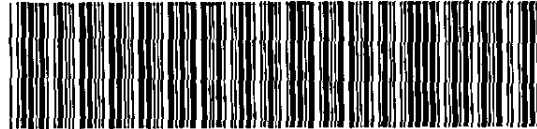
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CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 195271 5011958

AUTHORIZATION :

COST LIMIT : \$ 155.00

FILED  
05 FEB - 9th  
TALLAHASSEE  
PATRICIA  
STATE  
FLORIDA  
7:57

ORDER DATE : February 9, 2005

ORDER TIME : 2:57 PM

ORDER NO. : 195271-005

CUSTOMER NO: 5011958

CUSTOMER: Ms. Jacqueline Lachance  
Greenspoon Marder Hirschfeld  
Rafkin Ross & Berger, P.a.  
Suite 500  
201 East Pine Street  
Orlando, FL 32801

DOMESTIC FILING

NAME: LAKE WILSON INVESTMENTS, 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  
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Justin Cheshire - EXT. 2909

EXAMINER'S INITIALS: \_\_\_\_\_

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name:**

The name of the Limited Liability Company is:

LAKE WILSON INVESTMENTS, LLC**ARTICLE II - Address:**

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

**Principal Office Address:**P.O. BOX 941330MAITLAND, FLORIDA 32794**Mailing Address:**P.O. BOX 941330MAITLAND, FLORIDA 32794**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

N. Dwayne Gray, Jr., Esq.

Name

201 East Pine Street, Suite 500Florida street address (P.O. Box **NOT** acceptable)Orlando, Florida 32801FL

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)

Page 1 of 2

**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:**RICHARD FARMERP.O. BOX 941330Maitland, Florida 32794N. DWAYNE GRAY, Jr.201 East Pine Street, Suite 600Orlando, Florida 32801

(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.)

N. Dwayne Gray, Jr., Esq., Authorized Representative

Typed or printed name of signee

**Filing Fees:****\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent****5 30.00 Certified Copy (Optional)****5 5.00 Certificate of Status (Optional)**