

LO5000015501

(Requestor's Name)

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(City/State/Zip/Phone #)

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(Business Entity Name)

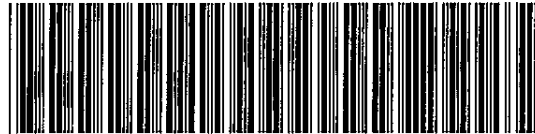
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05 FEB 15 AM 8:46  
DIVISION OF CORPORATION

EFFECTIVE DATE  
2/14/05

FILED  
05 FEB 15 AM 11:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032  
REFERENCE : 204381 10463A  
AUTHORIZATION : *Patricia Pizjuts*  
COST LIMIT : \$ 155.00

FILED  
05 FEB 15 AM 11:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ORDER DATE : February 14, 2005  
ORDER TIME : 5:52 PM  
ORDER NO. : 204381-005  
CUSTOMER NO: 10463A

EFFECTIVE DATE  
*2/14/05*

CUSTOMER: Ms. Larissa K. Lincoln  
Cohen Norris Scherer  
Weinberger & Wolmer  
Suite 400  
712 U.s. Highway 1  
North Palm Bch, FL 33408-7146

DOMESTIC FILING

NAME: 500 OVERLEASECO, LLC

EFFECTIVE DATE: 02/14/05

- ARTICLES OF INCORPORATION
- CERTIFICATE OF LIMITED PARTNERSHIP
- ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carina L. Dunlap - EXT. 2951

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

**ARTICLES OF ORGANIZATION OF  
500 OVERLEASECO, LLC**

**FILED**  
05 FEB 15 AM 11:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned hereby forms and establishes a limited liability company pursuant to Chapter 608, Florida Statutes as follows:

**ARTICLE I**

The name of this limited liability company is 500 OVERLEASECO, LLC.

**EFFECTIVE DATE**  
2/14/05

**ARTICLE II**

This limited liability company shall become effective February 14, 2005, unless sooner terminated as provided in the Operating Agreement executed or to be executed by the members.

**ARTICLE III**

The mailing address and street address of the principal place of business of this limited liability company is 712 U.S. Highway One, Ste 400, North Palm Beach, FL 33408. This limited liability company may, at its discretion, change the address of its principal place of business.

**ARTICLE IV**

The name and street address of the initial registered agent of this limited liability company is ANDREW M. JACOBSON, 712 U.S. Highway One, Suite 400, North Palm Beach, Florida 33408.

**ARTICLE V**

The management of this limited liability company shall be vested in a member or members (i.e. management committee as described in the Operating Agreement). The initial manager shall be Richard Sabella, 130 Bear's Club Dr., Jupiter, FL 33477.

ARTICLE VI

Additional members may be admitted to this limited liability company upon such terms and conditions as shall be established by the members as described in the Operating Agreement.

IN TESTIMONY WHEREOF, I have hereunto subscribed my name this 14th day of February, 2005.

*[Handwritten Signature]*

ANDREW M. JACOBSON,  
Authorized Representative of a Member

STATE OF FLORIDA

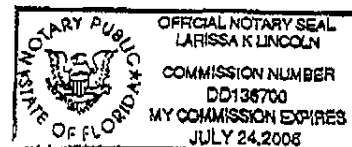
COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me this 14th day of February, 2005, by ANDREW M. JACOBSON, who is personally known to me or who has produced Florida State Driver's License Number N/A as identification and who did ( ) or did not (X) take an oath.

Executed this 14th day of February, 2005,

*[Handwritten Signature]*

Signature of Notary  
Printed Name: LARISSA K. LINCOLN  
My Commission Expires:  
My Commission Number:



**CERTIFICATE DESIGNATING REGISTERED OFFICE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

That **500 OVERLEASECO, LLC**, a Florida Limited liability company, with its office at 712 U.S. Highway One, Ste 400, North Palm Beach, FL 33408, has named **ANDREW M. JACOBSON**, at the same address as its initial registered agent to accept service of process within this State.

**ACKNOWLEDGMENT:**

Having been named registered agent to accept service of process for the above-stated limited liability company at the place designated in this Certificate, I hereby accept to act in such capacity and agree to comply with the applicable provisions of law.

By: *Andrew M. Jacobson*  
**ANDREW M. JACOBSON,**  
Registered Agent

**STATE OF FLORIDA  
COUNTY OF PALM BEACH**

The foregoing instrument was acknowledged before me this 14<sup>th</sup> day of February, 2005, by **ANDREW M. JACOBSON**, who is personally known to me or who has produced Florida State Driver's License Number N/A as identification and who did ( ) or did not (X) take an oath.

Executed this 14<sup>th</sup> day of February, 2005. *Larissa K. Lincoln*

Signature of Notary  
Printed Name: LARISSA K. LINCOLN  
My Commission Expires:  
My Commission Number:

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