

LOS000017482

Florida Department of State  
Division of Corporations  
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DIVISION OF CORPORATIONS

To:

Division of Corporations  
Fax Number : (850) 205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**LIMITED LIABILITY COMPANY**

rosemont llc

|                       |          |
|-----------------------|----------|
| Certificate of Status | 0        |
| Certified Copy        | 1        |
| Page Count            | 03       |
| Estimated Charge      | \$155.00 |

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JR

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ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name:

The name of the Limited Liability Company is:

Rosemont LLC

ARTICLE II – Address:

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

Principal Office Address:

Mailing Address:

3570 Coastal Highway  
St. Augustine, Florida 32084

Same

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

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

John R. Forbes, Esquire  
8825 Perimeter Park Boulevard, Suite 102  
Jacksonville, Florida 32216

*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, Florida Statutes.*

  
Registered Agent's Signature

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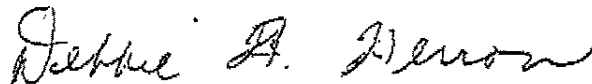
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**ARTICLE IV - Manager(s) or Managing Member(s):**

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

**Title:****Name and Address:****PRESIDENT**Debbie R. Herron  
3570 Coastal Highway  
St. Augustine, Florida 32084**REQUIRED SIGNATURE:**

Signature of a member or 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.



Typed or printed name of signee

**Filing Fees:**\$100.00 Filing fee for Articles of Organization  
\$ 25.00 Designation of Registered Agent  
\$ 30.00 Certified Copy (optional)  
\$ 5.00 Certificate of Status (Optional)**FILED**

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