

LO5000019133

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H05000046900 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From: Account Name : LEO J. SALVATORI
Account Number : I20030000112
Phone : (239) 263-1480
Fax Number : (239) 649-0158

RECEIVED
05 FEB 24 PM 12:51
DIVISION OF CORPORATIONS

LIMITED LIABILITY COMPANY

7842 Emerald Circle, LLC

Certificate of Status	0
Certified Copy	1
Page Count	034
Estimated Charge	\$155.00

RECEIVED
FEB 24 2005
DIVISION OF CORPORATIONS

Name Availability	
Document Filing	
Examiner	DCC
Updater	DCC
Updater Verifier	DCC
Acknowledgement	DCC
W. P. Verifier	DCC

Electronic Filing Menu

Corporate Filing

Public Access Help

H05000048900 3

**ARTICLES OF ORGANIZATION OF
7842 EMERALD CIRCLE, LLC**

The undersigned member hereby certifies that the members have associated themselves together for the purpose of becoming a limited liability company under the laws of the State of Florida, providing for the formation, rights, privileges, and immunities of limited liability companies for profit. I further declare that the following Articles shall be the Charter and authority for the conduct of business of such limited liability company.

ARTICLE I

NAME

The name of the limited liability company shall be 7842 EMERALD CIRCLE, LLC, (the "Company").

ARTICLE II

ADDRESS OF PRINCIPAL PLACE OF BUSINESS

The mailing address and street address of the principal office of this Company shall be 1899 Mission Drive, Naples FL 34109.

ARTICLE III

REGISTERED AGENT

The name and address of the initial registered agent in the State of Florida is as follows: Salvatori & Wood, P.L., 4001 North Tamiami Trail, Suite 330, Naples, Florida 34103.

ARTICLE IV

DURATION

This Company shall exist until December 31, 2055, unless sooner dissolved in a manner provided by law, as herein set forth or as provided in the Operating Agreement adopted by the members.

ARTICLE V

MANAGEMENT

The Company will be managed by a manager in accordance with the Operating Agreement. The name and address of the initial manager is as follows:

<u>Name</u>	<u>Address</u>
Craig Frankel	1899 Mission Drive Naples FL 34109

FILED
 2005 FEB 24 A 11:37
 STATE OF FLORIDA
 TALLAHASSEE COUNTY

H05000048900 3

ARTICLE VI

MEMBERSHIP

The Manager shall have the right to admit new members upon making such contributions as are set out in the Operating Agreement, and otherwise complying with and agreeing to the terms and provisions of the Operating Agreement. Additional members may also be admitted by the affirmative vote or two-thirds of the membership.

ARTICLE VII

MEMBERS' RIGHTS TO CONTINUE BUSINESS

The existence of the Company shall continue, notwithstanding the death, bankruptcy, or dissolution of a member, or the occurrence of any other event that terminates the continued membership of a member in the Company.

Executed by the undersigned member at Naples, Florida, on the 24th day of February, 2005.

Leo J. Salvatori, as authorized agent
and attorney-in-fact for Craig Frankel
1899 Mission Drive
Naples FL 34109

STATE OF FLORIDA
COUNTY OF COLLIER

This foregoing instrument was acknowledged before me this 24th day of February, 2005, by Leo J. Salvatori, as authorized agent and attorney-in-fact for Craig Frankel. He is personally known to me.

NOTARY SEAL

Nancy C. Jarvi, Notary Public
My commission expires: 9/24/2008

FILED
2005 FEB 24 A 11:37
SECRETARY OF STATE
TALLAHASSEE FLORIDA

H05000046900 3

**CERTIFICATE OF DESIGNATION OF REGISTERED OFFICE AND
REGISTERED AGENT**

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

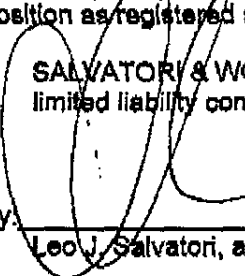
The name of the limited liability company is **7842 EMERALD CIRCLE, LLC.**

The name of the initial registered agent of the limited liability company is **Salvatori & Wood, P.L.**, and the address of the office of the registered agent is **4001 North Tamiami Trail, Suite 330, Naples, Florida 34103.**

REGISTERED AGENT ACCEPTANCE

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 that 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.

**SALVATORI & WOOD, P.L., a Florida
limited liability company**

By: 

Leo J. Salvatori, as Manager

Date: February 24, 2005

FILED
2005 FEB 24 A 11:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA