

LOS 0000 19747

Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

MUSCADINE, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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JR

ARTICLES OF ORGANIZATION

OF

MUSCADINE, LLC

ARTICLE I

NAME

The name of the Limited Liability Company is Muscadine, LLC.

ARTICLE II

ADDRESS

The mailing address of the Limited Liability Company's principal office is 8252 Wiltshire Drive, Port Charlotte, Florida 33981.

The street address of the Limited Liability Company's principal office is 8252 Wiltshire Drive, Port Charlotte, Florida 33981.

ARTICLE III

DURATION

The period of duration for the Limited Liability Company shall be perpetual.

ARTICLE IV

MANAGEMENT

The managing member who is designated by the managing members as the President shall carry out and further the decisions and actions of the managing members made under the Operating Agreement and shall be authorized to execute any and all reports, forms, instruments, documents, papers, writings, agreements, and contracts, including but not limited to deeds, bills of sale, assignments, leases, promissory notes, mortgages, and security agreements and any other type or form of document by which property or property rights of the Company are transferred or encumbered, or by which debts and obligations of the Company are created, incurred, or evidenced, that are necessary, appropriate, or beneficial to carry out or further those decisions or actions.

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In accordance with F.S. 608.408(3), the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.


JASON STEVENS

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

**UNDER THE PROVISIONS OF F.S. 608.415, THE UNDERSIGNED LIMITED
LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A
REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.**

The name of the limited liability company is Muscadine, LLC.

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

Glen N. Siegel, Esquire
18501 Mimlock Circle, Suite 304
Fort Charlotte, Florida 33948

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.

MUSCADINE, LLC

By: 

Glen N. Siegel
Registered Agent

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