

LO5000027335

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

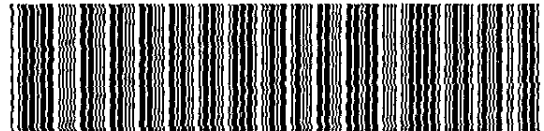
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



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03/16/05--01026--001 \*\*155.00

STATE  
TALLAHASSEE, FLORIDA

05 MAR 16 PM 1:25

FILED

*Law Office of  
Jamie B. Greusel, Esquire*

*1104 North Collier Boulevard*

*Marco Island, FL 34145*

*239-394-8111*

Jamie B. Greusel  
Licensed in FL and NJ

March 11, 2005

State of Florida  
Department of State  
Corporate Division  
P.O. Box 6327  
Tallahassee, FL 32314

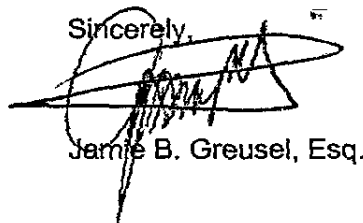
Re: CITY CENTER RESIDENCES, LLC

Gentlemen/Ladies:

Enclosed please find two original Articles of Organization for the corporation referenced above, along with a check in the amount of \$155.00 made payable to the Department of State, representing \$100.00 filing fee, \$25.00 for designation of registered agent for each and \$30.00 for certified copy for each.

Kindly file the original in your office and return a certified copy to our office.

Sincerely,



Jamie B. Greusel, Esq.

Enclosures

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STATE  
TALLAHASSEE, FLORIDA

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

City Center Residences, LLC

### ARTICLE II - Address:

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

#### Principal Office Address:

847 North Collier Blvd.  
Marco Island, Florida 34145

#### Mailing Address:

847 North Collier Blvd.  
Marco Island, Florida 34145

### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Jamie B. Greusel, Esq.

Name

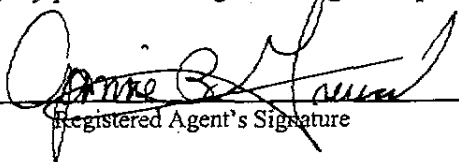
1104 North Collier Blvd.

Florida street address (P.O. Box **NOT** acceptable)

Marco Island, FL 34145

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

05 MAR 2008 11:25  
FILE  
TALLAHASSEE  
FLORIDA

(CONTINUED)

**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:**

MGRM

Daniel J. Dufault, Sr.  
847 North Collier Blvd.  
Marco Island, Florida 34145

MGRM

Daniel J. Dufault, Jr.  
847 North Collier Blvd.  
Marco Island, Florida 34145

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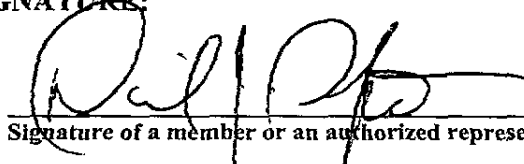
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(Use attachment if necessary)

**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.)

Daniel J. Dufault, Sr.

Typed or printed name of signee

**Filing Fees:**

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

SECRET  
TALLAHASSEE, FLORIDA

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FBI