

(Requestor's Name)
(Address)
(Address)
(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Sasmoss Enary Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
I_{I} I_{I}
1/1
Office Use Only
Ciliot Ode City



OS APR 15 AM 7: 34

ALLAHASSEF OF STATE



ACCOUNT NO. : 072100000032

REFERENCE :

318211

COST LIMIT : \$ 160.00

ORDER DATE: April 15, 2005

ORDER TIME : 3:29 PM

ORDER NO. : 318211-005

CUSTOMER NO: 4355221

CUSTOMER: Ms. Clara Scocozzo

Collins Brown Caldwell Barkett & Garavaglia 756 Beachland Boulevard

Vero Beach, FL 32963

DOMESTIC FILING

NAME: RCL DEVELOPMETN VI, LLC

EFFECTIVE DATE:

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: Darlene Ward - EXT. 2935

EXAMINER'S INITIALS:

ALLANGS M. T. S. M. T

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LL ARTICLE I - Name: The name of the Limited Liability Company is:

RCL Development VI, 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:
5099 North A1A, Suite A Vero Beach, FL 32963	5099 North A1A, Suite A
	Vero Beach, FL 32963

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

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

Robert C. Lyles, Jr. Name 5099 North A1A - Suite A Florida street address (P.O. Box NOT acceptable) Vero Beach, FL 32963 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 appacity. 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 kieffured agent as provided for in Chapter 608, F.S.

Registered Agent's Signature

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Momber	Name and Address:	
MGRM	RCL Davelopment, Inc.	
	5099 North A1A, Suite A	
	Vero Beach, FL 32963	
MGRM	Barry R. Sullivan	
	320 Island Creek Drive	
	Vero Beach, FL 32963	

(Use attachment if necessary)		
NOTE: An additional article must be added if an effective date is requested.		
REQUIRED SIGNATURE:		
Signature of a metraber or	an authorized representative of a member.	
(In accordance with section of this document constitute that the facts stated here:	608.408(3), Florida Statutes, the execution s an affirmation under the penalties of perjury n are true.)	
ROBERT C. LYLES, JR		
Typed or printed name of signes		

Piling 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)

Page 2 of 2