

L05000040692

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

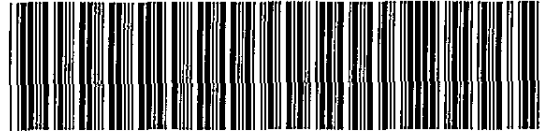
(Document Number)

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

Special Instructions to Filing Officer:

BK

Office Use Only



900050614799

04/26/05--01006--018 \*\*155.00

FILED  
05 APR 26 PM 12:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
05 APR 26 10:11:25  
TALLAHASSEE, FLORIDA

GRAY | ROBINSON  
ATTORNEYS AT LAW

SUITE 600  
301 SOUTH BRONOUGH ST. (32301)  
POST OFFICE BOX 1289  
TALLAHASSEE, FL 32302-3189  
TEL 850-222-7712  
TEL 850-577-9090  
FAX 850-222-3494  
FAX 850-577-8311  
gray-robinson.com

CLERMONT  
KEY WEST  
LAKE LAND  
MELBOURNE  
ORLANDO  
TALLAHASSEE  
TAMPA  
FLORIDA

kjusevitch@gray-robinson.com

April 26, 2005

Division of Corporations  
George Firestone Building  
409 East Gaines Street  
Tallahassee, Florida 32301

**Via Hand Delivery**

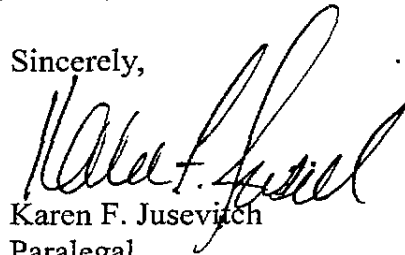
To Whom It May Concern:

Enclosed for filing, please find the **ARTICLES OF ORGANIZATION**, along with a check in the amount of **\$155.00** for the applicable filing fee and for a **CERTIFIED COPY** for the following entity:

**ST. JOHN'S BUSINESS PARK, LLC**

Upon receipt, please "date stamp" the copy of this letter provided, and call me at 577-9090, when the document is ready. Thank you for your assistance in this matter.

Sincerely,

  
Karen F. Jusevitch  
Paralegal

/kfj  
Enclosures

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is: ST. JOHN'S BUSINESS PARK, LLC

**ARTICLE II - Address:**

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

2502 W. First Street  
Sanford, FL 32771

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

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

Richard A. Rodgers  
301 E. Pine Street, Suite 1400  
Orlando, FL 32801

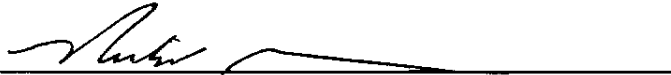
*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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

**Article IV - Management (Check box if applicable.)**

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

  
\_\_\_\_\_  
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.)

Richard A. Rodgers, Authorized Representative

**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  
05 APR 26 PM 12:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA