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(Re	questor's Name)			
(Address)				
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PICK-UP		MAIL		
(Business Entity Name)				
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DATE: 6-03-05_

NAME: SCG HARBOURWOOD, LLC

TYPE OF FILING: ARTICLES

COST:

RETURN: CERTIFIED COPY

ACCOUNT: FCA00000015

AUTHORIZATION:

ABBIE/PAUL HO



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SCG HarbourWood, LLC

ARTICLE II - Address:

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

Principal Office Address:

1123 Marbella Plaza Drive

Tampa, Florida 33619

Weston

Mailing Address:

1123 Marbella Plaza Drive

Tampa, Florida 33619

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

> NRAI Services, Inc. Name

2731 Executive Park Drive, Suite 4 Florida street address (P.O. Box NOT acceptable)

> FLORIDA 33331 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 60% Florida Statutes.

NRAI Se ces, Inc. and Registered Agent's Signature

Page 1 of 2 (CONTINUED) 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 Member		Name and Address:	
MGR	e.	David R. Vaughan	
		1123 Marbella Plaza Drive	
		Tampa, Florida 33619	
		<u> </u>	
and the second	· 2	<u> </u>	
(Use attachment if necessary)			

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Incol

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.)

Alexander T. McClain By: Typed or printed name of signce

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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)