

LOS000068351

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

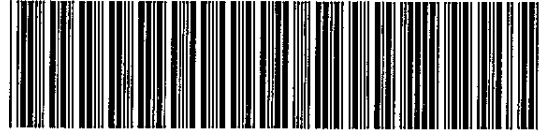
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

BK

Office Use Only

~~105A000459965~~
105A00045965



400056653084

EFFECTIVE DATE
7/5/05

FILED
05 JUL 12. PM 1:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
05 JUL 12 PM 12:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 478115 81011A

AUTHORIZATION :

Patricia Pujato

COST LIMIT : \$ 155.00

05 JUL 12 PM 1:34
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : July 12, 2005

ORDER TIME : 11:37 AM

ORDER NO. : 478115-005

CUSTOMER NO: 81011A

CUSTOMER: Nicole Lodato
Holcomb & Mayts, P.a.

201 N. Armenia Ave.

Tampa, FL 33609

EFFECTIVE DATE
7/5/05

DOMESTIC FILING

NAME: ALACHUA APARTMENTS, LLC

EFFECTIVE DATE: JULY 5, 2005

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

CONTACT PERSON: Kimberly Moret - EXT. 2949

EXAMINER'S INITIALS: _____

~~EFFECTIVE DATE~~
7/5/05

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

FILED
05 JUL 12 PM 1:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLE I
NAME**

The name of the Limited Liability Company is Alachua Apartments, LLC.

**ARTICLE II
ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is: 5405 Cypress Center Drive, Suite 320, Tampa, Florida 33609.

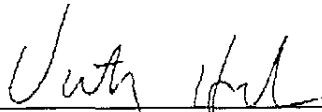
**ARTICLE III
EFFECTIVE DATE**

The Limited Liability Company shall be effective as of July 5, 2005.

**ARTICLE IV
REGISTERED AGENT, REGISTERED OFFICE,
AND RESIDENT AGENT'S SIGNATURE**

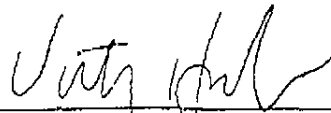
The name and the Florida street address of the registered agent are Victor W. Holcomb, Esquire, 201 N. Armenia Ave., Tampa, Florida, 33609.

Having been named as registered agent and to accept service of process for the above-named 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 provision 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.



Victor W. Holcomb, Esquire

IN WITNESS WHEREOF, the undersigned representative hereby acknowledges that, in accordance with Section 608.408(3), Florida Statutes, the execution of these Articles constitutes an affirmation under the penalties of perjury that the facts stated herein are true.



Victor W. Holcomb, Esquire