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SECRETARY OF STATE

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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: White Picket Fence Properties LLC (Name of Limited Liability Company)	
(Name of Limited Liability Company)	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Michael E. Nebel (Name of Person)	
(Name of Person)	
White Picket Fence Properties LLC (Firm/Company)	_
1345 Clay Street	
Winter Park, FL 32789 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Sandee SNebel at (407) 797-2458 20 20 (Area Code & Daytime Telephone Number) 20 20 20 20 20 20 20 20 20 20 20 20 20	
Enclosed is a check for the following amount:	Emercial Communication of the Communication of the
\$125.00 Filing Fee \$\ \text{Certificate of Status} \text{Certified Copy} \text{(additional copy is enclosed)} \text{\$\frac{1}{2}\$\$ \$\$\$ \$	
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street P.O. Box 6327	

Tallahassee, Florida 32314

Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

White Picket Fence Properties 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:
1345 Clay Street same Winter Park FL 32789
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Michael E. Nebel
1345 Clay Street Florida street address (P.O. Box NOT acceptable)
Winter Park FL 32789 ACC STATE OF THE STATE
Having been named as registered agent and to accept service of process for the above stated limite 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 the statutes relating to the proper and complete performance of my duties, and I amfamiliar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S
Michael & nebel
Registered Agent's Signature

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manag "MGRM" = Man		Name and Address:		
MGR	<u> </u>	Michael E. Nebel 1345 Clay Street Winter Park, FL 327	789	· .
MGRM	·· · · · · · · · · · · · · · ·	Sander S. Nebel 1345 Clay Street Winter Park, FL 32	789	
	<u> </u>			
	<u> </u>			s
(Use attachment	• •	33.326		
		added if an effective date is requested	*	
REQUIRED SIG	Signature of a member or (In accordance with section of this document constitutes that the facts stated herein	an authorized representative of a member. 608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury are true.) - Nabel or printed name of signee	2005 JUL ILI A 10 SECRETARY OF ST	
Filing Fees:	<u>.</u>		2	

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)\$ 5.00 Certificate of Status (Optional)