

L05000077619

AUG 05 2005 10:30 FR PROSKAUER ROSE
Division of Corporations

561 995 4751 TO 5063417110009#18 P.01/02

H05000187599

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H05000187599 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)205-0383

From: Account Name : PROSKAUER ROSE LLP
Account Number : 074673001063
Phone : (561)995-4751
Fax Number : (561)241-7145

RECEIVED

05 AUG -5 AM 11:20

DIVISION OF CORPORATIONS

LIMITED LIABILITY COMPANY

FT. MYERS-SUMMERLIN LLC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2005 AUG -5 A 11:09

FILED

Name Availability	
Document Examiner	DCC
Updater	DCC
Updater	DCC
Verifier	DCC
Amended/Agreement	DCC
W. P. Verityer	

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing

Public Access Help

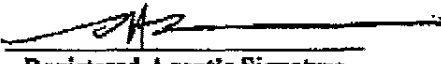
H05000187599

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**The name of the Limited Liability Company is: FT. MYERS-SUMMERLIN LLC**ARTICLE II - Address:**The mailing address and street address of the principal office of the Limited Liability Company is: 1500 W. Cypress Creek Road, Suite 409, Fort Lauderdale, FL 33309.**ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature:**

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

Scott Brenner
1500 W. Cypress Creek Road, Suite 409
Fort Lauderdale, FL 33309

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
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.)

Scott Brenner, Managing Member

Typed or printed name of signee

2005 AUG -5 A 11:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED