

Florida Department of State

Division of Corporations Public Access System

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Division of Cor	-porations
SFan Number	: (850)205-0383
HIFrom: 2 Account Name Account Number HI None C Eax Number HI S Number	: SHUFFIELD LOWMAN : I20030000118 : (407)581-9800 : (407)581-9801
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LIMITED LIABILITY COMPANY

LASH PROPERTIES THREE, LLC



AUG-12-2005 14:00 (((H050001937303)))

SHUFFIELD LOWMAN

ARTICLES OF ORGANIZATION OF LASH PROPERTIES THREE, LLC A Florida Limited Liability Company

ARTICLE I NAME

The name of this limited liability company is LASH PROPERTIES THREE, LLC, referred to in these Articles of Organization as the "Company".

ARTICLE II MAILING AND STREET ADDRESS

The mailing address and street address of the principal office of the Company are as follows:

11937 S Orange Blossom Trail Orlando, FL 32837-9252

ARTICLE III COMMENCEMENT OF COMPANY'S EXISTENCE

In accordance with Section 608.409(1), Florida Statutes, the Company's existence shall be deemed to have commenced on August 12, 2005, or if later, such date as if five (5) business days prior to the date on which these Articles of Organization are filed by the Florida Department of State.

ARTICLE IV REGISTERED AGENT

The address of the initial Registered Office and the Registered Agent at such address are as follows:

James K. Lashley, Jr. 11937 S Orange Blossom Trail Orlando, FL 32837-9252

ARTICLE V MANAGEMENT

The Company is to be a member-managed company. A manager may receive compensation for his services.

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AUG-12-2005 14:00

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ARTICLE VI APPLICABLE LAW

The Company is created pursuant to Chapter 608, Florida Statutes, and shall be governed by the laws of the State of Florida.

James

ACCEPTANCE OF DESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned submits the following statement of acceptance of his designation as Registered Agent for the Company:

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 of the Florida Statutes.

James

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