

Aug-24-2005 03:44pm

From: RUDEN, MCCLOSKEY, SMITH, SCHUSTER & RUSSELL, P.A.

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Account Name : RUDEN, MCCLOSKEY, SMITH, SCHUSTER & RUSSELL, P.A.  
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DIVISION OF CORPORATIONS

LIMITED LIABILITY COMPANY

The Windbrooke Circle Associates, LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

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ARTICLES OF ORGANIZATION  
OF  
THE WINDBROOKE CIRCLE ASSOCIATES, LLC  
a Florida Limited Liability Company

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a limited liability company under the laws of the State of Florida do set forth the following:

1. NAME. The name of the limited liability company is THE WINDBROOKE CIRCLE ASSOCIATES, LLC (the "Company").
2. MAILING AND STREET ADDRESS OF PRINCIPAL OFFICE. The mailing and street address of the principal office of the Company is: 4708 Sweetmeadow Circle, Sarasota, Florida 34238.
3. REGISTERED AGENT. The name and address of the initial registered agent in the State of Florida, whose Consent to Appointment as Registered Agent accompanies these Articles of Organization are: Judy A. Giannini, 4708 Sweetmeadow Circle, Sarasota, Florida 34238.

The undersigned has executed these Articles of Organization on the 16 day of August, 2005.

By: Judy A. Giannini  
Judy A. Giannini, Authorized Person

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**CERTIFICATION OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: THE WINDBROOKE CIRCLE ASSOCIATES, LLC.
2. The name and address of the registered agent and office are:

Judy A. Giannini  
4708 Sweetmeadow Circle  
Sarasota, Florida 34238

*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 its 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.*

  
Judy A. Giannini, Registered Agent

Date: 8-16-05

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