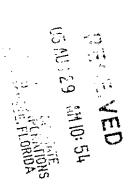
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ACCOUNT NO. : 072100000032

REFERENCE :

COST LIMIT :

ORDER DATE: August 29, 2005

ORDER TIME : 10:10 AM

ORDER NO. : 567379-005

CUSTOMER NO: 3487A

CUSTOMER: Ms. Bonnie R. Quigley

Icard Merrill Cullis Timm

Furen & Ginsburg, Pa

Suite 600

2033 Main Street Sarasota, FL 34237

DOMESTIC FILING

NAME: RIVEREST MHC, LLC

EFFECTIVE DATE:

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

CONTACT PERSON: Cindy Harris - EXT. 2937

EXAMINER'S INITIALS:

SHIP OF THE WAY

RTICLES OF ORGANIZATION FOR F	LORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is	s:
RIVEREST MHC, 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:
4301 32nd Street West, #E-28	4301 32nd Street West, #E-28
Bradenton, Florida 34205	Bradenton, Florida 34205
ARTICLE III - Registered Agent, Register The name and the Florida street address of the Richard S. Webb, IV, Esq.	
Nan	ae To
c/o lcard, Merrill, et al - 203	3 Main Street. #800
	address (P.O. Box NOT acceptable)
Serasota, FL 34237	FL
City, State	e, and Zip
liability company at the place designated is registered agent and agree to act in this capac statutes relating to the proper and complete	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and egistered agent as provided for in Chapter 608, F.S
75(
Registered Age	nt's Signature
(CONT)	INUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member Robert M. Smith MGR 4301 32nd Street West, #E28 Bradenton, Florida 34205 (Use attachment if necessary) NOTE: An additional article must be added if an effective date is requested. REQUIRED 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.)

Robert M. Smith, Manager

Typed or printed name of signee

Filing Pees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Page 2 of 2