L05000089422

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
}						
į į						
[
<u></u>						

Office Use Only



700059388847

US/12/US--01007--008 **155.00.

2005 SEP 12 AM 11: 40
2005 SEP 12 AM 11: 40
2005 SEP 12 AM 11: 40

05 SEP 12 MH IO: 28 DIVISION OF CORPORATION

SEP 12 2007

`	PORATE CESS,	"When you	u need	ACCESS	to the	world	TF	-
\	INC.	236 East 6t 7066 (3231 <i>5-</i> 7066)			e, Florida 32 or (800) 969		(850) 222-	1666
	<u> </u>	V	ALK	IN			•	
	ויו	CK UP:	-9	12/0	15-A	vide	•	r u n
9	CERTIFIED COPY		· · · · · · · · · · · · · · · · · · ·			<u> </u>	是喜	
	PHOTOCOPY			· · · · · · · · · · · · · · · ·	<u> </u>		P. S.	d T
	CUS			<u></u>			- 15 CG	2 10
	FILING		260	<u> </u>	* 	· <u>·</u>	- F08	
(C()}	St. Jah RPORATE NAME AND D	ns 2/0	F	TVes	Joses	s, Le		
. (COI	RPORATE NAME AND E	OCUMENT #)	· · · · · · · · · · · · · · · · · · ·		<u>.</u>	· · · ·	· · · · · · · · · · · · · · · · · · ·	
(CO)	RPORATE NAME AND I	OOCUMENT#)		·	*** ** ****	<u></u>		
(CO)	RPORATE NAME AND I	OCCUMENT #)	·	(A) (A) (A)	,			
. (COI	RPORATE NAME AND I	OCUMENT #)	· · · - · ·		<u>- </u>		-	· *** - ** - ** - ** - ** - ** - ** - *
(C())	RPORATE NAME AND I	DOCUMENT#)	<u> </u>	2	5 . 3 ⁷ 33 57.7	; 1	· <u></u>	
PECIAL INS	STRUCTIONS:	· · · · · · · · · · · · · · · · · · ·		<u></u>		•••		

. .

. .

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY CO

ARTICLE I - Name:

The name of the Limited Liability Company is:

\$t. Johns 210 Investors, 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:

One Independent Drive, 24th Floor

Jacksonville, FL 32202

2532 Dupont Drive

Irvine, CA 92612

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Brad Coe

Name

One Independent Drive, 24th Floor

Florida street address (P.O. Box NOT scceptable)

Jacksonville, FL 32202

City, State, and Zip

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 ull 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

(CONTINUED)

Page 1 of 2

Title; "MGR" = Manager	Name and Address:	
"MGRM" = Managing Memb	er	ma.
MGR	William J. Cox	B 5
	2532 Dupont Drive	100
	Irvine, CA 92612	OF
MGR	Kenneth M. Kaplan	1994 1994
	2532 Dupant Drive	• •
	Irvine, CA 92812	
-		·
		· • ,
(Use attachment if necessary)		
NOTE: An additional articl	e must be added if an effective date is requested.	
REQUIRED SIGNATURE:		
	muste in Kaple.	

Filing Fees:

5125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
5 30,00 Certified Copy (Optional)

Kenneth M. Kaplan

5 30,00 Certified Copy (Optional)
5 5,00 Certificate of Status (Optional)

Page 2 of 2

Typed or printed name of signer