

L050000 9091 0

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

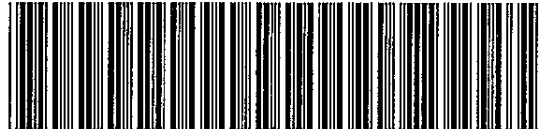
Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

BK

Office Use Only



500059604925

FILED

05 SEP 15 PM 1:58

STATE
REGISTRARS
TALLAHASSEE, FLORIDA

RECEIVED

05 SEP 15 PM 1:05

STATE
REGISTRARS
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 597877 107982A

AUTHORIZATION :

COST LIMIT : \$ 155.00

Patricia Pizito

FILED
05 SEP 15 PM 1:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : September 15, 2005

ORDER TIME : 10:59 AM

ORDER NO. : 597877-005

CUSTOMER NO: 107982A

CUSTOMER: Ms. Gilda Oldham
Elk Bankier Christu & Bakst
LLP
Suite 200E, 4800 N Federal Hwy
Sanctuary Centre
Boca Raton, FL 33431

DOMESTIC FILING

NAME: SPOKANE INVESTMENTS, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT. 2956

EXAMINER'S INITIALS: _____

ARTICLES OF ORGANIZATION

of

SPOKANE INVESTMENTS, LLC

FILED
05 SEP 15 PM 1:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I
NAME

The name of the limited liability company shall be SPOKANE INVESTMENTS, LLC.

ARTICLE II
ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company shall be 385 Glenbrook Drive, Atlantis, FL 33462.

ARTICLE III
REGISTERED AGENT, REGISTERED OFFICE
& REGISTERED AGENT'S SIGNATURE

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

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, Florida 32301

Having been named as registered agent to accept service of process for the above stated limited partnership 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.

Corporation Service Company

By: 

Registered Agent's Signature

Print Name and Title:

Jeanine Reynolds
as its agent

**ARTICLE IV
DURATION**

The period of duration for the Limited Liability Company shall be perpetual

**ARTICLE V
MANAGEMENT**

The Limited Liability Company is to be managed by one or more managers and is therefore, a Manager-managed company The name and address of the Manager are as follows:

Robert D. Johnston
385 Glenbrook Drive
Atlantis, FL 33462

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 D Johnston, Manager