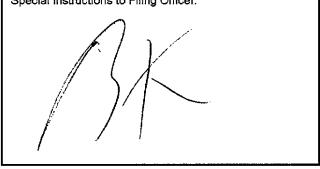
## L05000091395

(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:
$\cap$



Office Use Only

300059377243

ACIROLA HASSAHALLAT (= 11 d

## FLORIDA FILING & SEARCH SERVICES, INC. P.O. BOX 10662 TALLAHASSEE, FL 32302 1333 N. DUVAL STREET, TALLAHASSEE, FL 32303 ALLAND OF THE STATE OF THE STAT

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

09-16-2005

NAME:

PREMIER PROPERTY HOLDINGS FC2 LLC

TYPE OF FILING: ARTICLES OF ORGANIZATION

COST:

\$125

**RETURN:** 

ACCOUNT: FCA000000015

**AUTHORIZATION:** 

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	2 3
The name of the Limited Liability Company	ic.
The name of the Limited Liability Company	The state of the s
Premier Property Holdings FC2 LLC	
(Must end with the words "Limited Liability Company, "L	is:  mited Company" or their abbreviation "LLC," or "LC.,")  principal office of the Limited Liability Company is:
•	
ARTICLE II - Address:	A CONTRACTOR OF THE PROPERTY O
The mailing address and street address of the	principal office of the Limited Liability Company is:
was a toronomic total	Beralling Address
Principal Office Address:	Mailing Address:
2940 Le Bateau Drive	2940 Le Bateau Drive
Palm Beach Gardens, FL 33410	Palm Beach Gardens, FL 33410
Tunit Document Day and The Tenant Day and Tenant Da	
	****
(The Limited Liability Company cannot serve as its own Robusiness entity with an active Florida registration.)	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another
The name and the Florida street address of the	e registered agent are:
Lisa S.	Halpem
Name	
2940 Le Bateau Drive	
Florida street	address (P.O. Box NOT acceptable)
Palm Beach Gardens	FL 33410
	e, and Zir
liability company at the place designated a registered agent and agree to act in this capa 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 existered agent as provided for in Chapter 608, F.S

(CONTINUED) Page 1 of 2

The name and address of each Manager or Managing Member is as follows: Title: "MGR" = Manager Name and Address: "MGRM" - Managing Member MGR Lisa S. Halpern 2940 Le Bateau Drive Palm Beach Gardens, FL 33410 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) 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.) Lisa S. Halpern Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation

ARTICLE IV- Manager(s) or Managing Member(s):

Page 2 of 2

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)