

L05000097150

(Requestor's Name)

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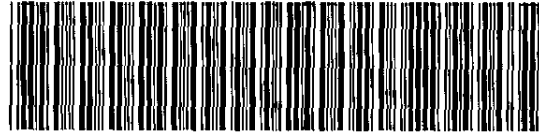
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECORDED

05 OCT -3 PM 10:59

DIVISION OF CERTIFICATION



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 630010 6099A

AUTHORIZATION :

COST LIMIT : \$ 155.00

ORDER DATE : October 3, 2005

ORDER TIME : 9:24 AM

ORDER NO. : 630010-005

CUSTOMER NO: 6099A

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: BLUE DEVIL 96, LLC

*****FILE FIRST*****

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

CONTACT PERSON: Kimberly Moret - EXT. 2949

EXAMINER'S INITIALS: _____

**ARTICLES OF ORGANIZATION
OF
BLUE DEVIL 96, LLC**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned hereby forms and establishes a limited liability company under the laws of the State of Florida.

ARTICLE I

The name of this limited liability company is Blue Devil 96, LLC ("Company").

ARTICLE II

This limited liability company shall have the perpetual existence from the date of filing these Articles with the Department of State unless sooner terminated by law.

ARTICLE III

The mailing address and street address of the principal place of business of the Company is 2701 South Flagler Drive, West Palm Beach, FL 33405. The Company may at its discretion, at any time, change the address of its principal place of business.

ARTICLE IV

The name and street address of the initial registered agent of this Company is Daniel Doorakian, 625 N. Flagler Drive, 9th Floor, West Palm Beach, FL 33401.

ARTICLE V

The name and address of the initial managing members are: Tim Schwarz, whose address is 2701 South Flagler Drive, West Palm Beach, FL 33405 and T. Spencer Crowley, whose address is 2 South Biscayne Blvd., Suite 3400, Miami, FL 33131-1802.

IN WITNESS WHEREOF, I have hereunto subscribed my name this 30 day of September,
2005.

AUTHORIZED AGENT

Daniel Doorakian
Daniel Doorakian

STATE OF FLORIDA)
COUNTY OF PALM BEACH)

The foregoing instrument was acknowledged before me this 30 day of September,
2005, by DANIEL DOORAKIAN, the authorized agent, who is personally known to me, **OR** has
produced _____ as identification.

Enid J. Nalerio
Notary Name: _____
Notary Public
Serial (Commission) Number
(If any) _____

(NOTARY STAMP)



Enid J. Nalerio
MY COMMISSION # DD209557 EXPIRES
June 18, 2007
BONDED BY TROY FAIN INSURANCE, INC.

I am familiar with and hereby acknowledge and accept the obligations of the Registered
Agent for Blue Devil 96, LLC.

Daniel Doorakian
Daniel Doorakian
Registered Agent