1050004327

2005 OCT 19 P 2: 32

		SECRET
(Requ	uestor's Name)	TALLAH/
(Addı	ress)	
(Addi	ress)	
(City/	State/Zip/Phone	(#)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nan	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer	
Openia marandona to 1	anny Omoor.	
	, , A '	۵ ا
	,	. 486
	•	
]
<u></u>		

Office Use Only

90060751899

16/13/03/4-61/03/55/55/55/55

COVER LETTER

FILED

TO:

Registration Section .
Division of Corporations

2005 OCT 19 P 2: 32

SUBJECT: Park Place at Greenbriar, LLC

(Name of Limited Liability Company)

SECRETARY OF STATE TALLAHASSEE, FLORIDA

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gene Lanton		
Q	Name of Person)	
Coastal Bay Realty, LLC		·
C	Firm/Company)	
One North Dale Mabry Hw	y, Suite 1070	
	(Address)	
Tampa, FL 33609		
(City)	State and Zip Code)	- 11
For further information concerning this matter, please	call:	
Dan Roberts	at (813) 871 - 1	700
(Name of Person)	(Area Code & Daytime T	
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\ \tag{Certificate of Status}\$	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY & ORIGANY

ARTICLE I - Name:	TALLAHASSEE, FLORIDA
The name of the Limited Liability Company is:	TOURINA TOURINA
Park Place at Greenbriar, LLC	
(Must end with the words "Limited Liability Company, "Limited	ed Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	
The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
One North Dale Mabry Hwy, Suite 1070	One North Dale Mabry Hwy, Suite 1070
Tampa, FL 33609	Tampa, FL 33609
	`
business entity with an active Florida registration.) The name and the Florida street address of the r Gene Lanton Name	egistered agent are:
2188 Muirfield Way	Iress (P.O. Box NOT acceptable)
	. ,
City, State, a	FL and Zip
Having been named as registered agent and to a	

(CONTINUED)
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:

FILED

<u>Title:</u>	Name and Address: 2805 00	T 19 P 2: 32
"MGR" = Manager		
"MGRM" = Managing Member	SECRE TALLAH	TARY OF STATE ASSEE, FLORIDA
MGRM	L. Timothy Zaring	MUSCE, FLORIDA
	3814 West Street, Suite 100	_
	Cincinnati, OH 45227	-
MGR	Coastal Bay Properties, LLC	
	One North Dale Mabry HWY, Suite 1070	_
	Tampa, FL 33609	_ _
		_
	· · · · · · · · · · · · · · · · · · ·	_
		_
		_
		
		_

(Use attachment if necessary)

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.)

GENE LANTON

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

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