

L05000107389

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

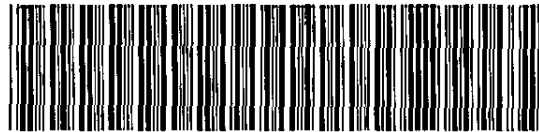
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE  
STATE  
FLORIDA

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TALLAHASSEE  
STATE  
FLORIDA

Sonstate Research  
Requester's Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State/Zip      6056-5454  
Phone #



Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. Maguerade Avalon, LLC  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

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STATE  
FALLS  
FLORIDA

- ☒ Walk in      ☐ Pick up time \_\_\_\_\_  
☐ Mail out      ☐ Will wait      ☐ Photocopy
- ☒ Certified Copy  
☒ Certificate of Status

**NEW FILINGS**

- ☐ Profit
- ☐ Not for Profit
- ☒ Limited Liability
- ☐ Domestication
- ☐ Other

**AMENDMENTS**

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

**OTHER FILINGS**

- ☐ Annual Report
- ☐ Fictitious Name

**REGISTRATION/QUALIFICATION**

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

\_\_\_\_\_  
Examiner's Initials

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED  
LIABILITY COMPANY**

**ARTICLE I - Name**

The name of the Limited Liability Company is:

MASQUERADE AVALON, LLC

**ARTICLE II - Address**

The mailing address and the street address of the principal office of the Limited Liability Company is:

13001 Founders Square Drive  
Orlando, Florida 32828

**ARTICLE III - Registered Agent and Office and Registered Agent's Signature**

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

Corporation Company of Orlando  
300 South Orange Avenue  
Suite 1000 (BMJ)  
Orlando, Florida 32801

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FALLS CHURCH, VIRGINIA  
STATE OF FLORIDA

*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 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 as provided for in Chapter 608, Florida Statutes.*

Corporation Company of Orlando

By: J. Gregory Humphries  
(Registered Agent's Signature)  
J. Gregory Humphries, Vice President

Paul A. Hechenberger  
Signature of a member or an  
authorized representative of a member.  
Paul A. Hechenberger, Authorized Representative

(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.)