

Nov 10 05 08:09a

Levin, Tannenbaum, Band, Gates & Pugh

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Division of Corporations

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(((H05000261564 3)))

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To:

Division of Corporations
Fax Number : (850)205-0383

From:

Account Name : LEVIN, TANNENBAUM, BAND, GATES & PUGH
Account Number : I19980000105
Phone : (941)316-0111
Fax Number : (941)366-8491

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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

Mocassin Village Management, LLC

Certificate of Status	0
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ARTICLES OF ORGANIZATION

MOCASSIN VILLAGE MANAGEMENT, LLC

a Florida limited liability company

ARTICLE I
NAME

The business and affairs of the Limited Liability Company shall be conducted under the name of:

MOCASSIN VILLAGE MANAGEMENT, LLC

ARTICLE II
PRINCIPAL OFFICE

The street address and the mailing address of the principal place of business of the Limited Liability Company shall be:

P. O. Box 21695
Sarasota, FL 34276

ARTICLE III
INITIAL REGISTERED AGENT/OFFICE

The registered office of the Limited Liability Company and its initial registered agent shall be:

Yaron Devald
5499 Oak Crest Drive
Sarasota, Florida 34233

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ARTICLE IV
MANAGEMENT AND POWERS

The business and affairs of the Limited Liability Company shall be managed by one or more Managers elected as provided in the Regulations or Operating Agreement of the Limited Liability Company.

IN WITNESS WHEREOF, these Articles of Organization have been executed as of the
9th day of NOVEMBER 2005.

By: A. Goldberg
Abraham Goldberg

"Authorized Representative"

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60-11111-01

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 608.415 of the Florida Statutes, the undersigned Limited Liability Company submits the following statement to designate a registered office and registered agent in the State of Florida.

1. The name of the Limited Liability Company is:

MOCASSIN VILLAGE MANAGEMENT, LLC

2. The name and the Florida street address of the registered agent is:

Yaron Devald
5499 Oak Crest Drive
Sarasota, FL 34233

Having been named 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

By:


Yaron Devald

"REGISTERED AGENT"

2005 NOV 10 12:11:09
SECRETARY OF STATE
TALLAHASSEE, FL 32301