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(Requestor's Name)
(Address)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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SECRETARY OF STATE
DIVISION OF CORPORATIONS

COVER LETTER

TO: Registration Se Division of Col		-				
SUBJECT: UN	IVERSITY TO	DWW mited Liabil	PROPERTIE ty Company)	ES_	LLC	-
The enclosed Articles of	Organization and fee(s) a	are submitte	l for filing.			DIVID 200
Please return all corresp	ondence concerning this n	natter to the	following:			SION SION
An	nanda	Vaug (Name of	han			2005 NOV 29 PH 4: 48
		(Name of		<u> </u>		- PA
Mag	ellan Gro	UP (Firm/Co				F: 1
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BOCA	KATON,	Cin/Etata an	FL 334 d Zip Code)	187		
	ţ	Cny/State an	1 Zip Code)			
For further information	concerning this matter, ple	ease call:				
Amanda (Name	Vaughan of Person)	at ((Area Code & Daytime	474 Telephone	V4 (X Number)	103)
Enclosed is a check for	r the following amount:	:				
☐ \$125.00 Filing Fee	\$130,00 Filing Fee Certificate of Status		.55.00 Filing Fee & fied Copy onal copy is enclosed)	Certif Certi	60.00 Filing ficate of Stat fied Copy onal copy is en	us &
	Mailing Address Registration Section Division of Corporation		Street/Courier Addre Registration Section Division of Corporation			

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

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

UNIVERSITY 7	TOWN PROPERT	TIES L	LC
(Must end with the words "Limited Liability Compa	any, "Limited Company" or their abbrevia	tion "LLC," or "L.C.	.,")
ARTICLE II - Address:			
The mailing address and street address	of the principal office of the Li	mited Liability	Company is:
-	• •	·	• •
Principal Office Address:	Mailing Address:		
OI PARK OF COMMERCE BLU	D. 701 PARK OF	COMMERCE	BLUD,
SUITE 100	Sure IM		
BOLA RATON, FL 334	87 BOCA R	ATON, FL	33487
			•
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address	egistered Office, & Registered own Registered Agent. You must designate s of the registered agent are:	Agent's Signa	tur as 🗒
(The Limited Liability Company cannot serve as its business entity with an active Florida registration. The name and the Florida street address	egistered Office, & Registered own Registered Agent. You must designa	Agent's Signa	tur as 🗒

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, F.S.

Registered Agent's Signature (REOVIRED

(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: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member TOI PARK OF COMMERCE BLUD, STE 100 BOCA RATON MGR701 PARK OF COMMERCE BLUD BOCA RATON. 701 PARK OF COMMERCE BLUD. BOLA RATON. (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: N/A (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 pepresentative 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.) AS PRESIDENT OF Typed or printed name of signee GROUP INVESTMENTS LLC.

\$125.00 Filing Fee for Articles of Organization and Designation

Filing Fees:

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