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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

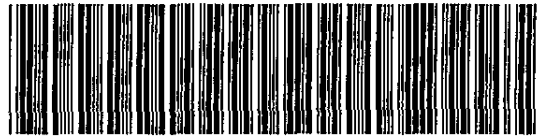
(Business Entity Name)

(Document Number)

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# HONIGMAN

Honigman Miller Schwartz and Cohn LLP  
Attorneys and Counselors

Gayle C. Aiken

(313) 465-7208

Fax: (313) 465-7209  
gaiken@honigman.com

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*Via FedEx*

December 6, 2005

Florida Department of State  
Division of Corporations  
409 East Gaines Street  
Tallahassee, FL 32399

**Re: RJB Esplanade LLC**

Dear Sir/Madam:

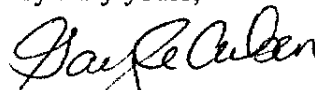
Enclosed for filing are the Articles of Organization of RJB Esplanade LLC together with our check in the amount of \$125.00 to cover the filing fee.

Please return the filed document to the undersigned.

If you have any questions or problems with regard to this request, please contact the undersigned by telephone call to (313) 465-7208.

Thank you for your assistance and cooperation.

Very truly yours,



Gayle C. Aiken  
Paralegal

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DIVISION OF CORPORATIONS

Enclosures

DETROIT.2025299.1

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

RJB Esplanade LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

**ARTICLE II - Address:**

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

**Principal Office Address:**

516 Lakeview Road, Villa III  
Clearwater, FL 33756

**Mailing Address:**

516 Lakeview Road, Villa III  
Clearwater, FL 33756

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Robert J. Banks  
Name

516 Lakeview Road, Villa III  
Florida street address (P.O. Box **NOT** acceptable)

Clearwater, FL 33756      FL  
City, State, and Zip

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*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 (REQUIRED)  
Robert J. Banks, Registered Agent

**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

Robert J. Banks Holdings LLC

516 Lakeview Road, Villa III

Clearwater, FL 33756

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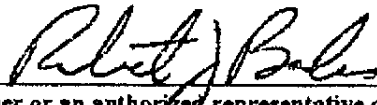
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(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)  
(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 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.)

By: Robert J. Banks, Authorized Representative

\_\_\_\_\_  
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)