# KILLGORE PLARLMAN Face40783635 Dec 44 205 14:33 For U Dividing of Corporations Page of 1 Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

# (((H05000280389 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From:

Fax Number

Account Name : KILLGORE, PEARLMAN, STAMP, ORNSTEIN & SOUTRES Account Number : 119980000007 Phone : (407)425-1020

# LIMITED LIABILITY COMPANY

Chester Ave., LLC

(407)839-3635

| Certificate of Status | 0        |  |  |  |  |  |
|-----------------------|----------|--|--|--|--|--|
| Certified Copy        | 1        |  |  |  |  |  |
| Page Count            | 02       |  |  |  |  |  |
| Estimated Charge      | \$155.00 |  |  |  |  |  |

Restropic Filing Menus

Corporate Filing,

Rublic Access Help.

G

R

AH 10: 30

 KILLGORE PEARLMAN
 Fax:4078393635
 Dec 14 2005 14:38
 P.02

 850-205-0381
 12/9/2005 12:22
 PAGE 001/001
 Florida Dept of State



December 9, 2005

1

FLORIDA DEPARTMENT OF STATE Division of Compositions KILLGORE, PEARLMAN, STAMP, ORNSTEIN & SQUIRES

SUBJECT: CHESTER AVE., LLC REF: W05000054417

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document must contain both the street address of the principal office and the mailing address of the entity.

Please return your document, along with a copy of this letter, within 50 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6853.

Leslie Sellers Document Specialist FAX Aud, #: H05000280389 Letter Number: 105A00071258

RECEIVED 05 DEC 14 PH 2: 53 UIVISION OF CORPORATION

P.O BOX 6327-Tallahassee, Flonda 32314

 KILLGORE PEARLMAN
 Fax: 4076393635
 Dec 14 2005 14:38
 P. 03

 12/14/2005
 14:31
 4073841909
 RL HAINES
 PAGE 02/03

.

Fax Audit Number H0:1000280389 3

# ARTICLES OF ORGANIZATION FOR CHESTER AVE., LLC A FLORIDA LIMITED LIABILITY COMPANY

# ARTICLE I Name:

The name of the Limited Liability Company is:

# CHESTER AVE., LLC

#### ARTICLE II Address:

The mailing address of the principal office of the Limited Liability Company is as follows:

# CHESTER AVE., LLC 2235 Mercator Drive Orlando, Florida 32807

The street address of the principal office of the Limited Liability Compary is as follows:

# CHESTER AVE., LLC 2235 Mercator Drive Orlando, Florida 32807

ARTICLE III Registered Agent, Registered Office, & Registered Agent 5 Signature:

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

Timothy L. Durocher Killgore, Pearlman, Stamp, Orustein & Squires, P.A. 2 South Orange Ave., 5<sup>th</sup> Floor Orlando, FL 32802

Having been named as registered agent and to accept service of provess 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

Frepared by: Timothy L. Durocher Killgore, Pearlman, Starry, Ornstein & Squires P.O. Box 1913, Orlando, Flotida 32802-1913 (407) 425-1020

#### Fax Audit Nur iber H05000280389 3

2

ö

ł

| NILLOURE PEARL      | MAN Fax:4078393635 | Dec 14 2005 | 14:38 | P.04       |
|---------------------|--------------------|-------------|-------|------------|
| 12/14/2005 14:31 40 | 73841909           | RL HAINES   |       | PAGE 03/03 |

Fax Audit Number, H0, j000280389 3 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

# ARTICLE IV Management:

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company.

Signature of a member or an authorized representative of a member.

# The Richards Group, Inc., Sole Member/Managing Manber Typed or printed name of signee

(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.)

## ARTICLE V Appliesble Law

The Company is created persuant to Chapter 608, Florida Statutes, and shall be governed by the laws of the State of Florida.

## ARTICLE VI **Term of the LLC**

The term of the Limited Lizbility Company shall be perpetual with no predetermined termination date.

> \$100.00 Filing Fee for Articles of Organization \$25.00 Designation of Registered Agent \$30,00 Certified Copy (optional) \$5.00 Certificate of Status (optional)

Propared by Timothy L. Durosher Killgore, Peartman, Stamp, Ornstein & Source P.O. Box 1913, Orlando, Florida 32802-1913 (407) 425-1020

Fax Audit Number H05000280389 3

AM 10:

မ္မ