

L05000122126

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

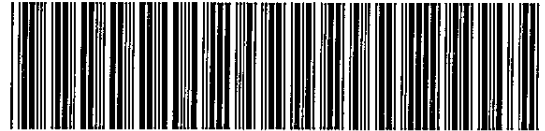
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

CALL [Signature]

Office Use Only



700062318187

12/23/05--01035--009 **155.00

FILED

05 DEC 23 PM 3:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

05 DEC 23 PM 1:11

STATE
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUSLEY & McMULLEN

ATTORNEYS AND COUNSELORS AT LAW

227 SOUTH CALHOUN STREET
P.O. BOX 391 (ZIP 32302)
TALLAHASSEE, FLORIDA 32301
(850) 224-9115 FAX (850) 222-7560
Writer's Direct Line: (850) 425-5478

December 23, 2005

Secretary of State
409 East Gaines Street
Tallahassee, Florida 32301

Re: LLCs

Dear Madam/Sir:

Enclosed are an original and one copy (which we would like file stamped) of the Articles of Organization for the following four LLCs:

1. Terrace House Apartments, LLC
2. Astoria Hills Apartments, LLC
3. Old Bainbridge Apartments, LLC
4. McCauley Apartments, LLC

A check in the amount of \$155.00 is enclosed for each LLC, comprised of the \$100.00 filing fee, \$25.00 Designation of Registered Agent fee, and \$30.00 certified copy fee.

Please do not hesitate to phone our office if you have any questions. Thank you in advance for your usual assistance in these matters.

Sincerely,

Beth Dyal, Assistant to
John E. Brenneis

/bd

Enclosures

h:\jeb\stair\sos ltr arts.doc

FILED
03 DEC 23 PM 3:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
VIA HAND DELIVERY

**ARTICLES OF ORGANIZATION
OF
ASTORIA HILLS APARTMENTS, LLC**

The undersigned, pursuant to the provisions of Chapter 608, Florida Statutes, provides the following information for the purpose of forming a Limited Liability Company under the laws of the State of Florida.

**ARTICLE I.
Name**

The name of the Limited Liability Company is **ASTORIA HILLS APARTMENTS, LLC.**

**ARTICLE II.
Address**

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

Commodore, #1206
4715 Thomas Drive
Panama City Beach, FL 32408

**ARTICLE III.
Registered Agent and Registered Office**

The name and street address of the Limited Liability Company's initial registered agent are:

John E. Brenneis
227 S. Calhoun Street
Tallahassee, FL 32301

Having been named as registered agent and as the person 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.



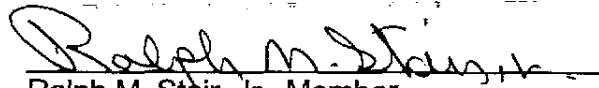
JOHN E. BRENNEIS, Registered Agent

**ARTICLE IV.
Management**

The Limited Liability Company shall be managed by its member(s) and is, therefore, a member-managed company.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 22 day December, 2005.

IN ACCORDANCE WITH SECTION 608.408(3), FLORIDA STATUTES, THE EXECUTION OF THIS DOCUMENT CONSTITUTES AN AFFIRMATION UNDER PENALTIES OF PERJURY THAT THE FACTS STATED HEREIN ARE TRUE.


Ralph M. Stair, Jr., Member

h:\jeb\stair\astoria hills\articles of org.doc