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Florida Department of State
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DIVISION OF CORPORATIONS

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Orlando Condo Holdings, LLC

Certificate of Status	0
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Electronic Filing Menu

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Help

FAX AUDIT # 4060000037293

**ARTICLES OF ORGANIZATION
OF
Orlando Condo Holdings, LLC**

ARTICLE I NAME

The name of the limited liability company shall be: **Orlando Condo Holdings, LLC**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 14227 Islamorada Drive, Orlando, Florida 32837.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: John Gordon, 14227 Islamorada Drive, Orlando, Florida 32837. Located in the County of Orange.

ARTICLE IV DURATION

The duration for the limited liability company shall be: 12/31/2046.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Managers and the name and address of the manager of the Limited Liability Company is:

John Gordon, 14227 Islamorada Drive, Orlando, Florida 32837

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Business Filings Incorporated, Organizer
Mark Schiff, AVP

Authorized Representative

Prepared by Mark Schiff, Business Filings Incorporated, 8025 Excelsior Dr. Suite 200,
Madison, WI 53717
(608) 827-5300

FAX AUDIT # 4060000037293

FAX AUDIT # 1401000000 37293CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES,
THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE
STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN
DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE
STATE OF FLORIDA.

The name of the limited liability company is: **Orlando Condo Holdings, LLC**

The name and address of the registered agent and office is John Gordon, 14227
Islamorada Drive, Orlando, Florida 32837. Located in the County of Orange.

Having been named as registered agent and to accept service of process for the above
stated 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.

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TALLAHASSEE, FLORIDA

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Signature: _____
John Gordon

Date : 01/05/06

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