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(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: HOLC				
3-27-06				

Office Use Only



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- Wilder Demonstration of the Property of

COVER LETTER

TO: Registration Solution of Co			
SURTECT. Aloma	Park Center, LLC		
South	(Name of Limite	d Liability Company)	
The enclosed Articles o	f Organization and fee(s) are s	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
Brian L. Du	ıke		
	(Name of Person)	
Duke Real	Estate, Inc.		
	(Firm/Company)	
709 Execu	utive Drive		
<u></u>		(Address)	
Winter Pa	rk, Florida 32789		
		/State and Zip Code)	
For further information	concerning this matter, please	call:	
Brian L. Duke		at (407) 740-005 (Area Code & Daytime T	7
(Name	of Person)	(Arca Code & Daytime T	elephone Number)
Enclosed is a check for	or the following amount:		
☑\$125.00 Filing Fee	S130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporatio Clifton Building 2661 Executive Center	ns Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:					
Aloma Park Center, LLC			<u>.</u> .		
(Must end with the words "Limited I	Liability Company, "Limite	d Company" or their abbreviation "LLC,"	or "L.C.,")		
ARTICLE II - Address: The mailing address and str	eet address of the pr	incipal office of the Limited Lia	bility Cor	npany i	s:
Principal Office Address:		Mailing Address:			
709 Executive Drive		709 Executive Drive		_	
Winter Park, Florida 32789		Winter Park, Florida 32789		-	
ARTICLE III - Registered (The Limited Liability Company car business entity with an active Florida The name and the Florida st Brian L.	not serve as its own Regist da registration.) treet address of the r Duke	Office, & Registered Agent's ered Agent. You must designate an individe egistered agent are:	Signatur dual or anoth	e: 0811123	P.
	Name		ć	့် ၁	•••
709 Exe	ecutive Drive		•		
	Florida street add	ress (P.O. Box <u>NOT</u> acceptable)	• 	Contragality of the contra	****
Winter P	ark, Florida 32789	FL	三三		
1	City, State, a	and Zip	3-1	••	
liability company at the registered agent and agree statutes relating to the pre accept the obligations o	place designated in t to act in this capacit oper and complete pe	accept service of process for the of his certificate, I hereby accept the v. I further agree to comply with informance of my duties, and I amstered agent as provided for in Court (REQUIRED)	e appointn the provis 1 familiar	nent as sions of with and	all

(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:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGRM	Brian L. Duke
	709 Executive Drive
	Winter Park, Florida 32789
MGRM	Allan O. Duke
	709 Executive Drive
	Winter Park, Florida 32789
MGR	Theresa M. Duke
	709 Executive Drive
	Winter Park. Florida 32789
MGR	Allison D. Duke
	_709 Executive Drive
	Winter Park, Florida 32789
(Use attachment if necessary) ARTICLE V: Effective date, if other than	an the date of filing: March 27, 2006 (OPTIONAL)
(If an effective date is listed, the date m to or 90 days after the date of filing.)	oust be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	2/62
Signature of a	nember or an authorized representative of a member.

Brian L. Duke

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

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

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