

APR. 3. 2006

FOR LAR

NO. 7524

Page 1 of 1

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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : FOLEY & LARDNER
Account Number : 072720000061
Phone : (904) 359-2000
Fax Number : (904) 359-8700

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return to CSS

FLORIDA/FOREIGN LIMITED LIABILITY CO.

ORMOND RANCH, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

APR 3 PM 1:10

RECEIVED

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DIVISION OF CORPORATION

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APR. 3. 2006 12:41PM

FOLEY LARDNER

NO. 7534 P. 2

Fax Audit No.: H06000087935

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: **ORMOND RANCH, LLC**

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company are:
1682 WEST HIBISCUS BOULEVARD, MELBOURNE, FLORIDA 32901.

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

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

HUGE M. EVANS, JR.

Name

1682 WEST HIBISCUS BOULEVARD

Florida street address (P.O. Box NOT acceptable)

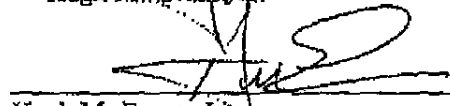
MELBOURNE, FL 32901

City, State, and Zip

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 completed 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.



Hugh M. Evans, Jr.



Hugh M. Evans, Jr.

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.)

Hugh M. Evans, Jr. Authorized Representative

Typed or printed name of signee

FILING FEES:

\$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)

Fax Audit No.: H06000087935

06 APR -3 AM 8:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AND
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