Florida Department of

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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

DIVISION

Account Name : C T CORPORATION SYSTEM

Account Number : FCA0000000023 Phone (850)222-1092

Phone : (850) 222-1692 Fax Number : (850) 878-5926 FLORIDA/FOREIGN LEMITED LIABILITY CO.

Shops at Market Square, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

AK.	rici.	ÜΙ	~ <u>₽</u>	ame	Ì,
The	name	of.	the	Lim	ì

the Limited Liability Company is:

SHOPS AT MAR	KET SQUARE, LLO	3		
(Must end with the words	"Limited Liability Company,	"Limited Company" o	r úseir abbroviation '	"LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address;	Malling Address:		
Steven Rosenfield	Steven Rosenfield		
610 S. Ridge Road	610 S. Ridge Road	2006	₹
Lake Forest, IL 80045	Lake Forest, IL 60045		SECRE DIVISION
ARTICLE III - Registered Agent, Registered Limited Liability Company cannot zerve as its own business entity with an active Florida registration.)	istered Office, & Registered Agent's Signature: on Registered Agent. You must designate an individual or another	JUN -6	ABYL
The name and the Florida street address of	of the registered agent are:	*	등유년 등의
C T Corporat:	ion System Name	10: 55	TATE TATE
1200 South Pr	ine Island Road reet address (P.O. Box NOT acceptable)		
<u>Plantation 1</u> City,	FI. 33 FD 4 State, and Zip		٠

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 firther 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, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	South Eastern Properties LLC
	c/o Steven Rosenfield
	610 S. Ridge Road, Lake Forest, IL 60045
	;
•	20
(Use attachment if necessary)	8
LEV: Effective date, if other than th	te date of filing: (OPTIONA
ffective date is listed, the date must it days after the date of filing.)	be specific and cannot be more than five business da
REQUIRED SIGNATURE:	:

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.)

Typed or printed name of signec

Filing Peer:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

ADAM M. GRANT

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