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(Red	questor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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J. BRYAN JUN 1 5 2006



ACCOUNT NO.: 072100000032  REFERENCE: 179303 7448543  AUTHORIZATION:	
COST LIMIT : \$495/00	
ORDER DATE : June 14, 2006  ORDER TIME : 3:21 PM	E.
ORDER NO. : 179303-005	06 J
CUSTOMER NO: 7448543	
DOMESTIC FILING  NAME: BENDERSON-KENDALL ASSOCIATES, LLC  EFFECTIVE DATE:	OF STATE OF
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
XX CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING	
CONTACT PERSON: Susie Knight - EXT. 2956	
EXAMINER'S INITIALS:	<u> </u>

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Associates, LLC		
(Must end with the wor	ds "Limited Liability Company	, "Limited Company" or their abbreviation "LLC," or "L.C.,"	")
ARTICLE II - A The mailing addre		f the principal office of the Limited Liability C	Company is:
Principal Office	Address:	Mailing Address:	
8441 Cooper Creek Boulevard		8441 Cooper Creek Boulevard	
University Park, Florida 34201		- · · · · · · · · · · · · · · · · · · ·	
	Registered Agent, Regi	University Park, Florida 34201  stered Office, & Registered Agent's Signature	
(The Limited Liability of business entity with an	Registered Agent, Region Company cannot serve as its over active Florida registration.)  Florida street address of		SIGN OF CORPOR
(The Limited Liability of business entity with an	Registered Agent, Regi Company cannot serve as its ov 1 active Florida registration.)	istered Office, & Registered Agent's Signatural Registered Agent. You must designate an individual or and	Treign of corporations of the state of the s
(The Limited Liability of business entity with an	Registered Agent, Registered Agent, Registered Agent, Registration active Florida registration.) Florida street address of Kevin M. Kinney  8441 Cooper Creek Boule	istered Office, & Registered Agent's Signatum Registered Agent. You must designate an individual or anount of the registered agent are:  Name	SIGN OF CORPOR
(The Limited Liability of business entity with an	Registered Agent, Registered Agent, Registered Agent, Registration active Florida registration.) Florida street address of Kevin M. Kinney  8441 Cooper Creek Boule	istered Office, & Registered Agent's Signatum Registered Agent. You must designate an individual or anough the registered agent are:	Treign of corporations of the state of the s
(The Limited Liability of business entity with an	Registered Agent, Registered Agent, Registered Agent, Registration active Florida registration.) Florida street address of Kevin M. Kinney  8441 Cooper Creek Boule	istered Office, & Registered Agent's Signatum Registered Agent. You must designate an individual or anount of the registered agent are:  Name	Treign of corporations of the state of the s

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 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..

By: Registered Agent's Signature (REQUIRED)

(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>	Name and Address:	
"MGR" = Manager "MGRM" = Managing M	famhar	
MORIVE - Managing M	icinoe:	
MGR	David H. Baldauf	
<b>,</b>	8441 Cooper Creek Boulevard	
	University Park, Florida 34201	
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(Use attachment if necess	som)	<b>9</b> 5
•		
ARTICLE V: Effective date, if o	ther than the date of filing: (0	OPTIONAL)
If an effective date is listed, the	date must be specific and cannot be more than five bus	siness days prior
o or 90 days after the date of fil	ing.)	
	•	
DECLUDED SIGNAMI		
<u>REQUIRED</u> SIGNATU	RE:	
5	wind H Raldam	
Signatu	re of a member or an authorized representative of a member.	. 11.7
of this d	rdance with section 608.408(3), Florida Statutes, the execution locument constitutes an affirmation under the penalties of perjury ne facts stated herein are true.)	Ann
Ву:	Daivd H. Baldauf, Manager	
	Typed or printed name of signee	

Filing Fees:

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

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