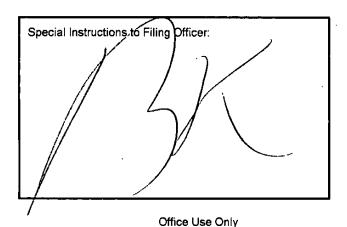
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	(Requestor's Nar	me)
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PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

07-28-06

NAME:

WOLFE PROPERTY HOLDINGS, LLC

TYPE OF FILING: ARTICLES OF ORGANIZATION

COST: \$125

**RETURN:** 

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAULMEDIGE

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	ALLA SECINE
Wolfe Property Ho	ildings LLC
(Must end with the words "Limited Liability Company, "Limited	
ARTICLE II - Address:	
The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2050 Ben Franklin Drive Unit A-602	2050 Ben Franklin Drive
Sarasota, Florida 34236	Sarasota, Florida 34236
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)  The name and the Florida street address of the re	red Agent. You must designate an individual or another
·	
Robert C. Wolfe Name	
2050 Ben Franklin Drive	e, Unit A-602
Florida street addr	ess (P.O. Box <u>NOT</u> acceptable)
Sarasota,	FL 36236
City, State, ar	ad Zip
liability company at the place designated in th	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as . 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..

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:

Title:		Name and Address:
"MGR" = Manag "MGRM" = Man		
MGRM		Robert C. Wolfe
		2050 Ben Franklin Drive, Unit A-602 Sarasota, FL 34236
		· 
	<del></del>	
	_	
(Use attachment	if necessary)	
LE V: Effective	date, if other than the d ted, the date must be	late of filing: (OPTIONAL specific and cannot be more than five business days
days after the da		•
REQUIRED SI	GNATURE:	
	Nulsy	
	_	or an authorized representative of a member. ion 608.408(3), Florida Statutes, the execution
	of this document constitu	utes an affirmation under the penalties of perjury

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)

that the facts stated herein are true.)
By: Robert C. Wolfe, Member

Typed or printed name of signee