

AUG-16-06

02:31PM

FROM: AKERMAN SENTERFITT & EIDSON

+407-843 7860

T-124 P.001/005 F-432

**L06000081188**

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H06000205954 3)))



H060002059543ABC+

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

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

From:  
Account Name : AKERMAN SENTERFITT & EIDSON  
Account Number : 076656002425  
Phone : (407)423-4000  
Fax Number : (407)843-6610

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2006 AUG 16 A 9:28

**FILED**

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**LIBERTY VALUE PLACE MANAGEMENT, LLC**

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

**AL**

Electronic Filing Menu

Corporate Filing Menu

Help

H06000205954 3

**ARTICLES OF ORGANIZATION FOR FLORIDA  
LIMITED LIABILITY COMPANY**

**ARTICLE I - Name**

The name of this limited liability company is **LIBERTY VALUE PLACE  
MANAGEMENT, LLC** (the "Company").

**ARTICLE II - Address**

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

2200 Lucien Way, Suite 410  
Maitland, Florida 32751

**ARTICLE III - Existence and Duration**

The Company shall commence its existence on the date that these Articles of Organization are filed with the Secretary of the State of Florida, and its duration shall be perpetual unless sooner dissolved by law.

**ARTICLE IV - Management**

The Company is a member managed Company.

**ARTICLE V - Registered Agent**


The name and street address of the initial registered agent of the Company is:

Wm. Michael Mikkelson  
2200 Lucien Way, Suite 410  
Maitland, Florida 32751

2006 AUG 16 A 9:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

Dated: August 14, 2006.

  
Wm. Michael Mikkelson,  
Authorized Representative

(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.)

H06000205954 3

### REGISTERED AGENT ACCEPTANCE

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, Florida Statutes.

**WM. MICHAEL MIKKELSON, Registered Agent**

By: *Wm. Michael Mikkelsen*  
**Wm. Michael Mikkelsen**

Dated: August 14, 2006.

**FILED**  
2006 AUG 16 A 9 28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA