## L06000086500

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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N SERVICE COMPANY.
ACCOUNT NO. : 072100000032
REFERENCE : 351074 7448543
AUTHORIZATION:
COST LIMIT: \$ 150.00
ORDER DATE : September 1, 2006
ORDER TIME : 2:27 PM
ORDER NO. : 351074-015
CUSTOMER NO: 7448543
DOMESTIC FILING
NAME: MSF ROUND ROCK-I, LLC
EFFECTIVE DATE:
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
XX CERTIFIED COPY . PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Susie Knight - EXT. 2956

EXAMINER'S INITIALS:

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY **ARTICLE I - Name:** The name of the Limited Liability Company is: MSF Round Rock - I, LLC (Must end with the words "Limited Linbility Company, "Limited Company" or their abbreviation "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: Mailing Address: 8441 Cooper Creek Boulevard 8441 Copper Creek Boulevard University Park, Florida 34201 University Park, Florida 34201 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: David H. Baldauf Name 8441 Cooper Creek Boulevard Florida street address (P.O. Box NOT acceptable) Florida

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..

Corporation Service Company

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

## The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member Manager David H. Baldauf 8441 Cooper Creek Boulevard University Park, Florida 34201 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_\_. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **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.) Daivd H. Baldauf, Manager By: Typed or printed name of signee

ARTICLE IV- Manager(s) or Managing Member(s):

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)