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(Reque	estor's Name)
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PICK-UP	WAIT MAIL
(Busine	ess Entity Name)
(Docun	nent Number)
Certified Copies	Certificates of Status
Special Instructions to Filir	ng Officer:





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DEPARTMENT OF STATE O



ACCOUNT	NO.	:	072100000032
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REFERENCE: 455722 7125725

AUTHORIZATION :

COST LIMIT

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ORDER DATE: September 15, 2006

ORDER TIME : 6:01 PM

ORDER NO. : 455722-005

CUSTOMER NO: 7125725

DOMESTIC FILING

NAME: PHIAN 'GRAND BAY LLC

EFFECTIVE DATE: '

	ARTICLE	ES OF	INCORPORA	ITA	ON		
	CERTIF	CATE	E OF LIMITE	ED I	PARTNE	RSH:	ΙP
XX	ARTICLE	ES OF	F ORGANIZA:	rioi	1		
PLEASE	RETURN	THE	FOLLOWING	AS	PROOF	OF	FILING:
	CERTI	FIED	COPY				

XX ____ CERTIFICATE OF GOOD STANDING

PLAIN STAMPED COPY

CONTACT PERSON: Sara Lea - EXT. 2914

EXAMINER'S INITIALS:



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

PHIAN GRAND BAY LLC

(Must end with the words "Limited Liability 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:		
430 GRAND BAY	Legal Dept.		
KEY BISCAYNE, FL 61043	1800 Moler Road	•	
	Columbus, Ohio 43207		

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:

Corporation Ser	vice Company
	Name
1201 Hays Stree	et
	Florida street address (P.O. Box <u>NOT</u> acceptable)
Tallahassee	FL 32301
	City, State, and Zip

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)

Laura R. Dunlap as its agent

(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" = Mana			
"MGRM" = Mar	aging Member		
MGRM		Jay L. Schottenstein	
	-	1800 Moler Road,	
	_	Columbus, Ohio 43207	
			····
	-		
	-		
			. "
	_		
(11	: <i>F</i> = ==================================		
(Use attachment	ii necessary)		
ICLE V: Effective	date, if other than the date of	of filing:	(OPTIONAL)
n effective date is lis	ted, the date must be spec	ific and cannot be more than five b	
90 days after the d	ate of filing.)		
REQUIRED SI	GNATURE:		
	(χ)	hellu	
			-
	Signature of a member or a	n authorized representative of a member	•
	(In accordance with section 6 of this document constitutes a that the facts stated herein a	08.408(3), Florida Statutes, the execution in affirmation under the penalties of perjury are true.)	,
	By: Pamula A. Li	:Ilie	
	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)