## L06000097678

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Sunshine Cake Estates, 10	C PARCE SERVICE
	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
	Vehicle Search
/	Driving Record
Requested by:	UCC 1 or 3 File
Name Date Time	UCC 11 Search
	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	is: £. &
	THE PARTY OF THE P
SUNSHINE LAKE ESTATES, LLC	75 TA
(Must end with the words "Limited Liability Company, "Lin	nited Company" or their abbreviation "LLC," or "L.C.,"
ARTICLE II - Address:	OF.
The mailing address and street address of the	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3000 Scott Street	3000 Scott Street
Des Plaines, IL 60018	Des Plaines, IL 60018
business entity with an active Florida registration.)  The name and the Florida street address of the  Peter J. Munson  Name  1501 South Florida	<u></u>
Florida street ac	idress (P.O. Box <u>NOT</u> acceptable)
Lakeland	FL 33803
City, State,	and Zip
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 608, F.S

(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:

"MGRM" = Managing Men	1001
MGR	James W. Soboleski
	3000 Scott Street
	Des Plaines, IL 60018
MGR	Benjamin Kadish
	3000 Scott Street
	Des Plaines, IL 60018
Use attachment if necessary	)
- 2	,
EV: Effective date, if other	than the date of filing: (OPTIONA
	than the date of filing: (OPTIONA e must be specific and cannot be more than five business day.
	e must be specific and cannot be more than five business day
ective date is listed, the date	e must be specific and cannot be more than five business day
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ective date is listed, the date	e must be specific and cannot be more than five business day
ective date is listed, the date lays after the date of filing.) EOUIRED SIGNATURE:	e must be specific and cannot be more than five business day

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

James W. Soboleski

that the facts stated herein are true.)

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee