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2006 OCT 27 P 4: 49
SECRETARY OF STATE
ALL AHASSEE, FLORIDA

COVER LETTER

TO: Registration S Division of Co	ection orporations		
SUBJECT: D&S	Apartment Rentals at		• •
	(Name of Limite	d Liability Company)	
The enclosed Articles of	of Organization and fee(s) are s	submitted for filing.	
Please return all corresp	condence concerning this matte	er to the following:	
Sandra D.	Hotwagner		
	(Name of Person)	
		(Firm/Company)	
6259 Win	gspan Way		ZOOL SEC TALL
		(Address)	OCI AH
Bradentor	n, FL 34203		27 ARY SSE
	. (City	/State and Zip Code)	CT 27 P TARY OF S AASSEE. FL
For further information	concerning this matter, please	call:	OCT 27 P 4: 49 RETARY OF STATE AHASSEE. FLORIDA
Sandra D. Hotwa	agner	at (941) 756-568	9
(Name	e of Person)	. (Area Code & Daytime T	elephone Number)
Enclosed is a check f	or the following amount:	. /	
∏ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations	Street/Courier Address Registration Section Division of Corporation	

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

D & S Apartment Rentals at Palm Aire, LLC (Must end with the words "Limited Liability Company, "Limited	d Company" or their abbreviation "	LLC." or	"I.C.")	
ARTICLE II - Address:	d company of their abbreviation	LLC, O	D.C.,)	
The mailing address and street address of the pr	incipal office of the Limite	d Liabi	lity Co	mpany is:
Principal Office Address:	Mailing Address:			
6259 Wingspan Way	6259 Wingspan Way			
Bradenton, FL 34203	Bradenton, FL 34203			_
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the respective to the server of the serve	ered Agent. You must designate an	SCHËETARY OF STATE ALL CHASSEE, FLORIDA	igatur 10年10日27 P 中中49	
	lress (P.O. Box NOT acceptable)		
Bradenton,	FL 34203			
City, State, a				
Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete pe accept the obligations of my position as regis	his certificate, I hereby acce v. I further agree to comply rformance of my duties, and	pt the a with the I am fo	ippointn e provis amiliar	nent as ions of all with and

Registered Agent's Signature (REQ IRED)

(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: "MGR" = Manager "MGRM" = Managing Memb	Name and Address:
MGR	David A. Provost 5128 Vasser Lane Sarasota, FL 34243
	2006 OCT 27 P 4: 49 SECRETARY OF STATE TALLAHASSEE, FLORIDA
to or 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of	a member or an authorized representative of a member.
(In accordance of this docum	e with section 608.408(3), Florida Statutes, the execution ent constitutes an affirmation under the penalties of perjury s stated herein are true:

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)