

Division of Corporations

Page 1 of 1

206000106860

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.

(((H06000264947 3)))



H060002649473ABC5

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:

Angelica M. Chirin
Account Name : AKERMAN, SENTERFITT & EIDSON, P.A.
Account Number : 075471001363
Phone : (305) 374-5600
Fax Number : (305) 374-5095

*SM***FLORIDA/FOREIGN LIMITED LIABILITY CO.****FOUR SEASONS CHICAGO, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

RECEIVED
06 NOV -2 AM 10:44
DIVISION OF CORPORATION

06 NOV -2 AM 9:33
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

FAX AUDIT No. H06000264947

**ARTICLES OF ORGANIZATION
FOR
FOUR SEASONS CHICAGO, LLC**

ARTICLE I - Name:

The name of the Limited Liability Company is: Four Seasons Chicago, LLC.

ARTICLE II - Address:

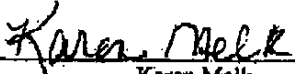
The mailing address and street address of the principal office of the Limited Liability Company is: c/o Karen Melk, 500 South Palm Ave., PH, Sarasota, FL 34236.

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Karen Melk
500 South Palm Ave., PH
Sarasota, FL 34236

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.


Karen Melk
Registered Agent's Signature

Signed and dated this 31st day of October, 2006.


Karen Melk
Authorized representative of a member

FAX AUDIT No. H06000264947

FILED
06 NOV -2 AM 9:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA