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EFFECTIVE DATE



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: SunTREE Professional Park LLC (Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Gary J. Foleno (Name o. Person)
Tuscany Com. Inc (Firm/Company)
1300 Bedford Drive Suite 101
Melbourne Fl. 32940 SE SECTION (City/State and Zip Code)
For further information concerning this matter, please call:
Cary J. Foleno at (32/) 242-3148 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\int \\$130.00 Filing Fee & Certificate of Status \$\int \\$155.00 Filing Fee & Certificate of Status \$\int \\$160.00 Filing Fee, Certificate of Status & Certificate Opy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	R	П	\mathbf{C}	LE	I	_	Na	m	e	

The name of the Limited Liability Company is:

Suntre Professional Park 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:	<u>Mailing Address:</u>
1300 Bed Ford Dr. Swite 101	P.O. Box 410457
melbourne	Melbourne
Melbourne Florida 32440	Florida 3244/-0457

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:

Tuscany Commercial, Juc

Name

1300 Bed Find Dr.

Florida street address (P.O. Box NOT acceptable)

Melbourne FL 32940

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..

Registered Agent's Senature (REQUIRED)

(CONTINUED) Page 1 of 2

> EFFECTIVE DATE 1-D1-06

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 Member	Name and Address:
MGR	Gary J Foleno 1300 Bedford Dr. 101 Melbourne, Fl 32940
	N/A
(Use attachment if necessary)	PH 12: 20
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.)	date of filing: // 0/-06 (OPTIONAL) e specific and cannot be more than five business days
REQUIRED SIGNATURE:	
/ 1	

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)

Gary J Folen o
Typed or printed name of signee

(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.)