

L060000108658

Division of Corporations

<https://efile.sunbiz.org/scripts/efilecovr.exe>

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.

((H06000271609 3)))



H060002716093ABC+

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: Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305)634-3694
Fax Number : (305)633-9696

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 NOV -8 AM 9:29

FILED

FLORIDA/FOREIGN LIMITED LIABILITY CO.

consolidated properties of tampa, llc

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

RECEIVED

06 NOV -8 PM 4:35

DIVISION OF CORPORATION

Electronic Filing Menu

Corporate Filing Menu

Help

H100000271609

④

ARTICLES OF ORGANIZATION FOR FLORIDA
LIMITED LIABILITY COMPANY

ARTICLE I - NAME

The name of the Limited Liability Company is: CONSOLIDATED PROPERTIES OF TAMPA, LLC.

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is 3141 SE 14th Avenue, Fort Lauderdale, Florida 33311.

ARTICLE III - DURATION

This limited liability company shall have perpetual existence.

ARTICLE IV - MANAGEMENT

The Limited Liability Company is to be managed by its member, Michael A. Simmons, 3141 SE 14th Avenue, Fort Lauderdale, Florida 33311.

ARTICLE V - INITIAL REGISTERED AGENT AND OFFICE

The initial registered agent for this limited liability company and the street address of the initial registered agent is: Jeffrey R. Eisensmith, Esquire, 5561 N. University Drive, Suite 103, Coral Springs, Florida 33067.

ARTICLE VI - ADDITIONAL MEMBERS

This limited liability company may admit additional members subject to approval by vote of a majority of the existing members.

ARTICLE VII - REGULATIONS

The regulations of this limited liability company may only be adopted, amended, altered or repealed by vote of a majority of the members.

ARTICLE VIII - MEMBERS' RIGHT TO CONTINUE BUSINESS

The members remaining after the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member, or after any other event which terminates the membership of a member, have the right to continue the business of this limited liability company subject to approval by unanimous vote of the remaining members; provided that at least two members remain.

ARTICLE IX - AMENDMENT

This limited liability company reserves the right to amend, alter or repeal any provision contained in these Articles of Organization in accordance with the Florida Limited Liability Company Act.

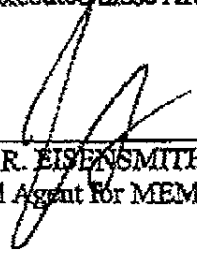
RECEIVED
TALLAHASSEE
STATE
FLORIDA

06 NOV - 8 AM 9:29

FILED

H100000271609

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this
8 day of NOV, 2006.


JEFFREY R. EISEN SMITH
Authorized Agent for MEMBER

FILED

06 NOV - 8 AM 9:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H000000271609

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 608.415 or 608.507,
Florida Statutes, the undersigned Limited Liability Company
submits the following statement in designating the registered
office/registered agent, in the State of Florida

1. The name of the Limited Liability Company is: **CONSOLIDATED PROPERTIES OF TAMPA, LLC.**
2. The name and address of the registered agent and office is: **JEFFREY R. EISENSMITH, ESQUIRE, 5561 N. University Drive, Suite 103, Coral Springs, Florida 33067.**

Having been named as a 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.

Signature

Date

11/8/06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 NOV -8 AM 9:29

FILED

H000000271609