# L06000112020

(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(Cit	y/State/Zip/Phone	: #)	
PICK-UP	WAIT	MAIL	
(Business Entity Name)			
(Do	cument Number)		
Certified Copies	Certificates	of Status	
Special Instructions to	Filing Officer:		
	Office Use Onl	у	



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FILING COVER : ACCT. #FCA-14	SHEET		PACE AND OF THE PACE AND PACE	
CONTACT:	KATIE WO	<u>NSCH</u>		
DATE:	<u>11/20/06</u>		To the	
<b>REF.</b> #:	000174.6032	7	7	
CORP. NAME:	GRAND OA	KS ASSOCIATES, LLC		
( ) ARTICLES OF INCO	DRPORATION	( ) ARTICLES OF AMENDMENT	( ) ARTICLES OF DISSOLUTION	
( ) ANNUAL REPORT		( ) TRADEMARK/SERVICE MARK	( ) FICTITIOUS NAME	
( ) FOREIGN QUALIFI	CATION	( ) LIMITED PARTNERSHIP	( XX ) LIMITED LIABILITY	
( ) REINSTATEMENT		( ) MERGER	( ) WITHDRAWAL	
( ) CERTIFICATE OF C	CANCELLATION			
( ) OTHER:				
STATE FEES PREPAID WITH CHECK# 51918 FOR \$ 155.00				
AUTHORIZATI	ON FOR A	CCOUNT IF TO BE DEBITE	D:	
	COST LIMIT: \$			
PLEASE RETUR	RN:			
( XX ) CERTIFIED CO		( ) CERTIFICATE OF GOOD STAN	DING ( ) PLAIN STAMPED COPY	

Examiner's Initials

### **ARTICLES OF ORGANIZATION**

GRAND OAKS ASSOCIATES, LLC a Florida limited liability company

#### ARTICLE I NAME

The business and affairs of the Limited Liability Company shall be conducted under the name of:

GRAND OAKS ASSOCIATES, LLC

## ARTICLE II PRINCIPAL OFFICE

The street address of the principal place of business of the Limited Liability Company within the State of Florida shall be:

240 S. Pineapple Avenue, 10<sup>th</sup> Floor Sarasota, FL 34236

and the mailing address of the Limited Liability Company within the State of Florida shall be:

240 S. Pineapple Ave., 10<sup>th</sup> Flr. Sarasota, FL 34230-6948

## ARTICLE III INITIAL REGISTERED AGENT/OFFICE

The registered office of the Limited Liability Company and its initial registered agent shall be:

David S. Band 240 S. Pineapple Ave., 10<sup>th</sup> Flr. Sarasota, FL 34230-6948

## ARTICLE IV MANAGEMENT AND POWERS

The business and affairs of the Limited Liability Company shall be managed by one or more Managers elected as provided in the Operating Agreement of the Limited Liability Company.

IN WITNESS WHEREOF, these Articles of Organization have been executed as of the day of November, 2006.

WITNESSES:

Print Name CAROL GORDON

Print Name Judith K. Green

"MANAGER"

#### <u>CERTIFICATE OF DESIGNATION OF</u> <u>REGISTERED AGENT/REGISTERED OFFICE</u>

Pursuant to the provisions of Section 608.415 of the Florida Statutes, the undersigned Limited Liability Company submits the following statement to designate a registered office and registered agent in the State of Florida.

1. The name of the Limited Liability Company is:

#### GRAND OAKS ASSOCIATES, LLC

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

David S. Band 240 S. Pineapple Ave., 10<sup>th</sup> Floor Sarasota, FL 34236

Having been named 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Date: November 17, 2006

"REGISTERED AGENT"