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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
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(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	·
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Office Use Only

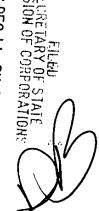


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UCC FILING & SEARCH SERVICES, INC. 1574 Village Square Blvd Ste 100 Tallahassee, Florida 32309 (850) 681-6528 P HOLD
FOR PICKUP BY
UCC SERVICES
OFFICE USE ONLY

December 11, 2006

CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

Casa Bonita 503, LLC

	Filing Evidence ☑ Plain/Confirmation Copy	Type of I □ Certificate	Document e of Status
	□ Certified Copy	□ Certificate	e of Good Standing
		□ Articles O	only
	Retrieval Request Photocopy	Articles &	er Documents to Include & Amendments Name Certificate
	☐ Certified Copy	□ Other	95
	NEW FILINGS	AMENDMENTS	SECRETA VISION OF 06 DEC 1
	Profit	Amendment	
	Non Profit	Resignation of RA Officer/Director	r
X	Limited Liability	Change of Registered Agent	PH 3: 36
	Domestication	Dissolution/Withdrawal	ON.C
	Other	Merger	
······			
	OTHER FILINGS	REGISTRATION/QUALIFICAT	ION
	Annual Reports	Foreign	
	Fictitious Name	Limited Liability	
ļ	Name Reservation	Reinstatement	
	Reinstatement	Trademark	
<u> </u>		Other	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Casa Bonita 503, LLC		,
Must and with the words "Limited Liability Comp	oany, "Limited Company" or their abbreviation "LLC," or "	L,C.,")
ARTICLE II - Address:		
The mailing address and street address	s of the principal office of the Limited Liabil	ity Company is:
Principal Office Address:	Mailing Address:	
26000 Hickory Blvd	26000 Hickory Blvd	
#503	#503	
Bonila Springs, FI 34134	Bonita Springs, Fl 34134	
Thomas F. Hudgin 801 12th Avenue	Name	Y OF STATE CORPORATION PM 3: 36
Naples	34102	'Λ
	Pity, State, and Zip	
liability company at the place desig	nt and to accept service of process for the abounded in this certificate, I hereby accept the applicate in this certificate, I hereby accept the application. I further agree to comply with the implete performance of my duties, and I am fai	ppointment as provisions of all

(CONTINUED)
Page 1 of 2

Title: "MGR" - Man; "MGRM" - Ma	Name and Address: ger naging Member	
MGR	R. Scott Addington	
	PO Box 141101	· ———
	Minneapolis, MN 55414	
MGRM	Steven L. Addington	
	8829 Highland Oaks Drive	
	Johnston, IA 50131	
MGRM	Jane A. Lane	
	5651 Highland Court	
	West Des Moines, IA 50266	
(Use attachmen	if necessary)	
CLEV: Effective	date, if other than the date of filing:	_ (OPTIONAL) e business (lays pr
CLEV: Effective	date, if other than the date of filing:	
CLE V: Effective effective date is little days after the c	date, if other than the date of filing: sted, the date must be specific and cannot be more than five ate of filing.) GNATURE: L. Seott Adding.	business days pr
CLE V: Effective effective date is little days after the d	date, if other than the date of filing:	business days pr
CLE V: Effective effective date is li	date, if other than the date of filing: sted, the date must be specific and cannot be more than five ate of filing.) GNATURE: L. Seott Adding.	business days pr

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Capy (Optional)
\$ 5.00 Certificate of Cadus (Optional)