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(Re	equestor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

EFFECTIVE DATE 2-7-07



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SECRETARY OF STATE

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COVER LETTER

TO:	Registration S Division of Co				•			
SUBJ	ECT: MONT	URA RANCH DEVEL						
		(Name of Limite	d Liability Compa	any)		•		
		of Organization and fee(s) are s						
Please	return all corresp	oondence concerning this matte	er to the following	:				
	SHELDON	JONTIFF						
		(Name of Person)				_	
	SHELDON	JONTIFF COMPAN	IY LLC			4		
			Firm/Company)			SE(07	
•	1375 GATEWAY BLVE., STE 9						£E8	4.2 4.2
			(Address)	<u>.</u>		SSE	w	, t a
	BOYNTO	N BEACH, FL 334	26-8304			79	T.	
		(City	State and Zip Code)		SPA	<u> </u>	ور ار مورد
For fu	rther information	concerning this matter, please	call:			P	8	
SHE	LDON JON	ΠFF	at (561	536-053	5			
	(Name	of Person)	(Area Code	& Daytime T	elephone Number)		
Enclo	sed is a check fo	or the following amount:						
▼ \$125	5.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155,00 Fi Certified Copy (additional copy i	/	\$160.00 I Certificate o Certified Co (additional copy	f Status &	ż	
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division Clifton B 2661 Exe	urier Addresson Section of Corporatio uilding cutive Center	ns			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	R	T	I	C	L	Æ	I	_	r	V	8	m	e:
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. 14

The name of the Limited Liability Company is:

MONTURA RANCH DEVELOPERS, LLC

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C,")

ARTICLE II - Address:

Daimainal Office Address.

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	<u>Mailing Address:</u>	
1375 GATEWAY BLVD., STE 9	1375 GATEWAY BLVD., STE 9	
BOYNTON BEACH, FL 33426-8304	BOYNTON BEACH, FL 33426-8304	
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of SHELDON JONTIFF	Registered Agent. You must designate an individ	
1	Name	
5834 BAY HILL CIRCI	LE	101 112:
Florida stre	eet address (P.O. Box NOT acceptable)	STATE LORIDA
LAKE WORTH,	FL 33463-6567	5 - 4
City, S	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 Signature (REQUIRED)

(CONTINUED) Page 1 of 2

EFFECTIVE DATE 3-707

Title: "MGR" = Manag "MGRM" = Mar	ger laging Member	Name and Address:	
MGR		SHELDON JONTIFF	
	_	5834 BAY HILL CIRCLE	
		LAKE WORTH, FL 33463-6567	
		- ASEC	07 F
		至	
		AS:	a
	_	—————————————————————————————————————	
		——————————————————————————————————————	—;>
		DE .	8
			
(Use attachment	if necessary)		
LE V: Effective of fective date is list days after the date	ted, the date must b	e date of filing: EBRUARY 72007. (OPT be specific and cannot be more than five busine	IONA ss day
REQUIRED SIG	GNATURE:	P_{2} , Ω	
	/ Hock	le fortil	
	Signature of a member	er or an authorized representative of a member.	
	_	er or an authorized representative of a member.	
	(In accordance with sec	ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury	
	(In accordance with secof this document const	ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury nerein are true.)	

Page 2 of 2

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

Filing Fees: