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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

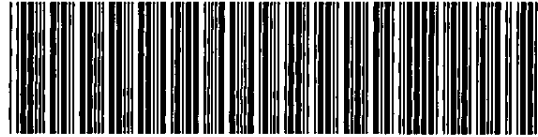
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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07 MAR 19 AM 8:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*[Handwritten signature]*

**TRANSMITTAL LETTER**

To: Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

From: Gabriel Ehrenstein  
6340 Via Tierra  
Boca Raton, FL 33433  
Telephone: 561-756-1582  
Fax: 561-488-6119

Date: March 13, 2007

Enclosed are the following items:

- Articles of Organization for SIX (6) Florida Limited Liability Companies
- Check in the amount of \$960.00 for the following:
  - o Filing fee and designation of registered agent – 125.00 for each of six companies
  - o Certified copy – 30.00 for each of six companies
  - o Certificate of Status – 5.00 for each of six companies

Please note that three (3) of these LLCs are the Managers of the other three LLCs. Thus, it might be necessary to create them in the right order:

- 1) DeFuniak GP, LLC
- 2) Shoemaker GP, LLC
- 3) Park Ridge GP, LLC
- 4) Arbours at DeFuniak Springs, LLC
- 5) Arbours at Shoemaker Place, LLC
- 6) Arbours at Park Ridge, LLC

At your earliest convenience, please use the enclosed filled-out FEDEX Airbill to send the certified copies, certificates, and other paperwork to:

Sam Johnston  
Arbour Valley Development, LLC  
33 Inverness Center Parkway  
Suite LL130  
Birmingham, AL 35242  
Phone: 205-981-3393

Thank you, and with any questions please call me, Gabe Ehrenstein, at cellphone 561-756-1582.

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

DeFuniak GP, 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:

33 Inverness Center Parkway

Suite LL130

Birmingham, AL 35242

#### Mailing Address:

33 Inverness Center Parkway

Suite LL130

Birmingham, AL 35242

### 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:

Stephen G. Lowitz

Name

3521 N. 53rd Avenue

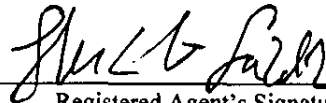
Florida street address (P.O. Box **NOT** acceptable)

Hollywood

FL 33021

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 Signature (REQUIRED)

(CONTINUED)

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**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:**

MGRM

John Moore

33 Inverness Center Parkway, Suite LL130

Birmingham, AL 35242

MGRM

David Sumrall

33 Inverness Center Parkway, Suite LL130

Birmingham, AL 35242

MGRM

Gabriel Ehrenstein

6340 Via Tierra

Boca Raton, FL 33433

MGRM

Samuel T. Johnston

33 Inverness Center Parkway, Suite LL130

Birmingham, AL 35242

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**

  
\_\_\_\_\_  
Signature of a member or an authorized representative of a member.

(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.)

Gabriel Ehrenstein

\_\_\_\_\_  
Typed or printed name of signee

**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)**

Additional Managers or Managing Members:

MGRM

Stephen G. Lowitz  
3521 N. 53<sup>rd</sup> Avenue  
Hollywood, FL 33021