

LO7060036305

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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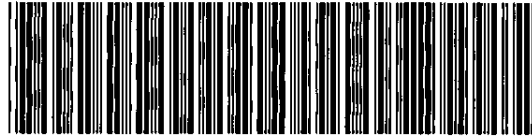
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FLORIDA SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED

07 APR -5 AM 8:43

FLORIDA SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

GRAY | ROBINSON  
ATTORNEYS AT LAW

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LAKELAND  
MELBOURNE

April 5, 2007

**VIA HAND DELIVERY**

Florida Department of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

Re: FLD Ventures, LLC  
Our File No. 5349-3

Dear Madam or Sir:

Enclosed are an original and one copy of Articles of Organization of **FLD VENTURES, LLC**.  
**PLEASE FILE THESE ARTICLES AND ISSUE A CERTIFIED COPY.**

A check in the amount of \$155.00 is enclosed for the filing fee and cost of the certified copy.  
Upon receipt of this request, please date-stamp the copy of this letter attached. Also, please call me at (850) 577-9090 x2832 when the certified copy is ready to be picked up.

Thank you for your assistance in this matter.

Sincerely,

*Mari-Jo Lewis-Wilkinson*

Mari-Jo Lewis-Wilkinson  
Paralegal

Enclosures

FILED  
07 APR 25 AM 8:43  
TALLAHASSEE  
FLORIDA  
SECRETARY OF STATE  
E-MAIL ADDRESS  
mwilkinson@gray-robinson.com

**ARTICLES OF ORGANIZATION**  
**FOR FLORIDA LIMITED LIABILITY COMPANY**

**FILED**  
07 APR -5 AM 8:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

FLD VENTURES, LLC

**ARTICLE II - Address:**

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

1560 N. ORANGE AVENUE, SUITE 660  
WINTER PARK, FLORIDA 32789

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

MICHAEL E. NEUKAMM  
301 EAST PINE STREET, SUITE 1400  
ORLANDO, FLORIDA 32801

*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

**ARTICLE IV - Management:**

The Limited Liability Company is to be managed by one or more managers and is, therefore, a "manager-managed" limited liability company.

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.



AUTHORIZED REPRESENTATIVE'S SIGNATURE

MICHAEL E. NEUKAMM

Typed or printed name of signee

**FILING FEES:**

\$100.00 Filing Fee for Articles of Organization  
\$25.00 Designation of Registered Agent  
\$30.00 Certified Copy (OPTIONAL)  
\$5.00 Certificate of Status (OPTIONAL)