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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Prestige Properties & Developments LLC	
(Name of Limited Liability Company)	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Paul Zachary Shelton Jr	
(Name of Person)	
Prestige Properties & Developments LLC	
(Firm/Company)	
8813 Warwick Shore Crossing	200; y e
(Address)	ii maara
Orlando, Florida 32829	Per anac
(City/State and Zip Code)	<u>}</u>
For further information concerning this matter, please call:	nicent.
Paul Zachary Shelton Jr at (407) 493-6288	
(Name of Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & Certificate of Status \$\bigcup \\$ Certified Copy (additional copy is enclosed) \$\bigcup \\$ Certified Copy (additional copy is enclosed)	
Mailing Address Registration Section Division of Corporations Street/Courier Address Registration Section Division of Corporations Division of Corporations	

Registration Section
Division of Corporation:
P.O. Box 6327
Tallahassee, FL 32314

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Prestige Properties & De	velopments LLC		
		mited Company" or their abbreviation "LLC," o	or "L.C.,")
ARTICLE II - Address	•		
		principal office of the Limited Liab	oility Company is:
Principal Office Addres	ia.	Mailing Address	
Frincipal Office Addres	i <u>s:</u>	Mailing Address:	O7
8813 Warwick Shore Crossing	<u>. </u>	8813 Warwick Shore Crossing	CRATE CARL
Orlando, Florida 32829		Orlando, Florida 32829	* - * * * * * * * * * * * * * * * * * *
		Oriando, Florida 32029	
-		Onando, Florida 32029	ASSET -
ARTICLE III - Registe	red Agent, Register		SSEE.
ARTICLE III - Registe (The Limited Liability Company business entity with an active FI	cannot serve as its own Re	red Office, & Registered Agent's Segistered Agent. You must designate an individu	SSEE OF THE SIGNATURE:
(The Limited Liability Company	cannot serve as its own Re orida registration.)	red Office, & Registered Agent's Segistered Agent. You must designate an individu	AR OF THE SIGNATURE IS A SIGNATURE I
(The Limited Liability Company business entity with an active Fl The name and the Florida	cannot serve as its own Re orida registration.)	red Office, & Registered Agent's Segistered Agent. You must designate an individu	AR OF THE SIGNATURE IS A SIGNATURE I
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(The Limited Liability Company business entity with an active Fl The name and the Florida Paul 8813	cannot serve as its own Re orida registration.) a street address of th Zachary Shelton Jr Nar Warwick Shore Cro	red Office, & Registered Agent's Segistered Agent You must designate an individual re registered agent are:	AR OF THE SIGNATURE IS A SIGNATURE I

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 51207

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:	
"MGR" = Manager "MGRM" = Managing Member		
MGRM	Paul Zachary Shelton Jr	
	8813 Warwick Shore Crossing	
	Orlando, Florida 32829	
•		
		•
(Use attachment if necessary)		,
• • • • • • • • • • • • • • • • • • • •	May	
ARTICLE V: Effective date, if other than	the date of filing: 12th 2007 (OPEONAL)	
to or 90 days after the date of filing.)	t be specific and cannot be more than five business days	prior
to or you and the date of mings,	ASS	्र प्राथमात्र स्टब्स्
DECYMPED CICNATURE	<u> </u>	Parament 3
<u>REQUIRED</u> SIGNATURE:		
	ORNIDA LORNIDA LORNIDA	
1		
Signature of a mer	mber or an authorized representative of a member.	
of this document co	n section 608.408(3), Florida Statutes, the execution onstitutes an affirmation under the penalties of perjury ed herein are true.)	
Paul Zachary She		
	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)