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Division of Corporations	Page 1 of 1
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To: Division of Corporation's Fax Number : (850)205-0383	
Fax Number : (850)205-0383	LL8
Account Name : LIBERTY INVESTMENT PROPERTIES INC Account Number : 120070000017	
Phone : (407)774-8818 Fax Number : (407)774-6697	

# FLORIDA/FOREIGN LIMITED LIABILITY CO.

07 MAY -8 AH IO: 49 LIBERTY VP SHREWSBURY, LLC RECEIVED Certificate of Status 0 Certificd Copy 1 01 Page Count Estimated Charge \$155.00 DB Help Electronic Filing Menu Corporate Filing Menu https://efile.sunbiz.org/scripts/efilcovr.exc

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### **ARTICLE I - Name**

The name of this limited liability company is LIBERTY VP SHREWSBURY, LLC (the "Company").

#### ARTICLE II - Address

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

2200 Lucien Way, Suite 410 Maitland, Florida 32751

## ARTICLE III - Existence and Duration

The Company shall commence its existence on the date that these Articles of Organization are filed with the Secretary of the State of Florida, and its duration shall be perpetual unless sooner dissolved by law.

#### **ARTICLE IV - Management**

The Company is a member managed Company.

#### **ARTICLE V - Registered Agent**

The name and street address of the initial registered agent of the Company is:

Wm. Michael Mikkelson 2200 Lucien Way, Suite 410 Maitland, Florida 32751

Dated: May 8, 2007.

Wm. Michael Mikkelson, Authorized Representative

(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.)

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## REGISTERED AGENT ACCEPTANCE

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 bereby 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, Florida Statutes.

## WM. MICHAEL MIKKELSON, Registered Agent

Dated: May <u>8</u>, 2007. Bv: Wm. Michael Mikkelson

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