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May 30, 2007

R (S):

J.	EAVIUES Tam	CORPORATION NAME (S) AND DOCUMENT NUMBER (Da Jackson Springs SNF LLC
	Filing Evidence □ Plain/Confirmation Co	Type of Document S Certificate of Status
	□ Certified Copy	□ Certificate of Good Standing □ Stand
		□ Articles Only For S
	Retrieval Request Photocopy Certified Copy	☐ All Charter Documents to Include Articles & Amendments ☐ Fictitious Name Certificate ☐ Other
	NEW FILINGS	AMENDMENTS
	Profit	Amendment
	Non Profit	Resignation of RA Officer/Director
X	Limited Liability	Change of Registered Agent
	Domestication	Dissolution/Withdrawal
	Other	Merger
	OTHER FILINGS	REGISTRATION/QUALIFICATION
	Annual Reports	Foreign
	Fictitious Name	Limited Liability
	Name Reservation	Reinstatement
	Reinstatement	Trademark
		Other

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY



A	RT	'IC	LE	I.	Na	me:

The name of the Limited Liability Company is:

TAMPA JACKSON SPRINGS SNF LLC

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
1835 NE MIAMI GARDENS DR #368	1835 NE MIAMI GARDENS DR #368
··-	

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

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

Name

1835 NE MIAMI GARDENS DR #368

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

NORTH MIAMI BEACH FLORIDA 331479

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, Florida Statutes.

TZVI BOGOMILSKY

Registered Agent's Signatur

Page 1 of 2 (CONTINUED)

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	TZVI BOGOMILSKY
	1835 NE MIAMI GARDENS DR #368
	NORTH MIAMI BEACH, FL 33179
-	
(Use attachment if necessary)	
NOTE: An additional article must	be added if an effective date is requested.
REQUIRED SIGNATURE: 2-	,//
/h~4///	
Signature of a member or at	authorized representative of a member.
(In accordance with section 6 of this document constitutes a that the facts stated herein are	\$8.408(3), Florida Statutes, the execution in affirmation under the penalties of perjury e true.)
TZVI BOGOMILSKY	•
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)