L07000058961

	(Reque	estor's Nar	ne)		
	(Addre	ss)			
	(Addre	ss)	· · · · · · · · · · · · · · · · · · ·		
	(City/S	tate/Zip/Ph	none #)		
PICK-UP	· [WAIT		MAIL	
	(Busine	ess Entity	Name)		
	(Docum	nent Numl	oer)		
Certified Copies		Certific	ates of	Status	
Special Instructions	to Filin	ng Officer:) .		<u></u> -





700102733017

TALLAHASSKE, FLORIDA

O7 JUN -5 AM 8: 41

OF STATE O



ACCOUNT NO. : 072100000032 REFERENCE: 931983 AUTHORIZATION : COST LIMIT : ORDER DATE: June 4, 2007 ORDER TIME : 4:45 PM ORDER NO. : 931983-005 CUSTOMER NO: 7511693 DOMESTIC FILING THERIAC ENTERPRISES OF RANCHO NAME: MIRAGE, LLC EFFECTIVE DATE: ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY ___ PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Doreen Wallace - EXT. 2928 EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FL	ORIDA LIMITED LIABILITY_COMPANY
ARTICLE I - Name:	是武 茅
The name of the Limited Liability Company is:	克曼 访 3
	S. 2
Theriac Enterprises of Rancho Mirage, L	LC TO THE TOTAL TOTAL TO THE TH
(Must end with the words "Limited Liability Company, "Limite	d Company" or their abbreviation "LLC," or "L.C.,")
	d Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	En
The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
	2234 Colonial Blvd
2234 Colonial Blvd	Fort Myers, FL. 33907
Fort Myers, Florida 33907	20212/020, 220, 33707
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Region business entity with m active Florida registration)	Office, & Registered Agent's Signature: ered Agent. You must designate an individual or another
The name and the Florida street address of the re	egistered agent are:
DDM, LLC	
Name	
2234 Colonial Blvd	
Florida street add	ress (P.O. Box <u>NOT</u> acceptable)
Fort Myers	FL 33907
City, State, as	nd Zip
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	accept service of process for the above stated limited his certificate, I hereby accept the appointment as a. I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S
Registered Agent's Signatu	ire (REOUIRED)

(CONTINUED) Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGR DDM, LLC 234 COlonial Blvd Fort Myers, FL. 33907 (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 inthorized 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.)

By:Catjy Newkirk

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)