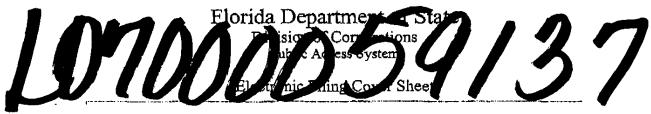
TRIAD

PAGE 01/03 Page 1 of 1

Division of Corporations



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To:

Division of Corporations

Fax Number : (850)205-0383.

From:

Account Name : TRIAD PROFESSIONAL SERVICES, LLC

Addount Number : I20020000094

Phone : (770)777-2091 Fax Number : (770)220-1943



ORIDA/FOREIGN LIMITED LIABILITY CO.

CORAL LANDING PROPERTY COMPANY, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

RTICLE II - Address: he mailing address and street address	of the principal of	office of the Limited Liability Co	mpany is:
rincipal Office Address:		Mailing Address:	
240 Marbella Plaza Drive	· .	1240 Marbella Plaza Drive	
ampa, Florida 33619		Tampa, Florida 33619	
he name and the Florida street address NRAI Services, Inc.	· .	in' in' in'	-5 A
THE THEORY IN	Name	OR O	81.51 STAI

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.

NRAISefyices, Inc.

Registered Agent's Signstare

Page 1 of 2 (CONTINUED)

(((H070001504073)))

AM 8: 53

Title:

Name and Address:

(((H07000150407 3)))

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

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

1240 Marbella Plaza Drive Tampa, Florida 33619
Tampa, Florida 33619
1
Use attachment if necessary)

Filing Fees; \$100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent

that the facts stated herein are true.)

Alexander T, McClain

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

rage 2 of 2

Typed or printed name of signee

(((H070001504073)))