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Division of Corporations

From:

Account Name

: SHAPIRO & ADAMS, P.A.

Account Number : I19990000101

Phone

~(561)691-0059

Fax Number

: (561)691-0066

LS

LORIDA/FOREIGN LIMITED LIABILITY CO.

Pennock Point Lot 7 Assumed Liabilities, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
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Corporate Filing Menu

6/6/2007

P.02/04

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Pennock Point Lot 7 Assumed L	Liabilities, LLC
Must end with the words "Limited Liability Co	ompany, "Limited Company" or their abbreviation "[.LC." or "L.C.")
WIST CONTO IT - URBRIDGE.	ress of the principal office of the Limited Liability Company is:

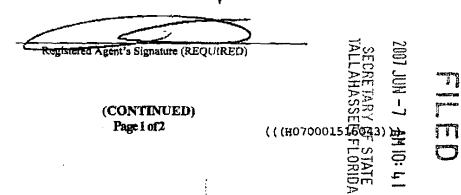
Principal Office Address:	Mailing Address:
525 N. Tryon Street	525 N. Tryon Street
Suite 1700	Suite 1700
Charlotte, NC 28202	Charlotte, NC 28202

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate on individual or another business entity with an active Florida registration.)

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

Robert Lee Shapiro, P.A.
· · Name
2401 PGA Boulevard, Suite 272
Florida street address (P.O. Box NOT acceptable)
Palm Beach Gardens FL 33410
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, F.S.



Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGR	Jaffrey Gifford
	525 N. Tryon Street
	Charlotte, NC 28202
	<u></u>
• • •	
•	
Tice attachment if necessary)	
LE V: Effective date, if other than the diffective date is listed, the date must be i	ste of filing; (OPTIONAL) specific and cannot be more than five business days prior
LE V: Effective date, if other than the diffective date is listed, the date must be a days after the date of filing.) REQUIRED SIGNATURE: Signature of member. (In accordance with section	specific and cannot be more than five business days prior of a member. In 608.408(3), Florida Statutes, the execution are an affirmation under the penalties of perfury
days after the date of filing.) REQUIRED SIGNATURE: Signature of the accordance with saction of this document constituted that the facts reside her Jeffrey Gifford	ion 608.408(3), Florida Statutes, the execution are true.
LE V: Effective date, if other than the difference date is listed, the date must be a days after the date of filing.) REOUIRED SIGNATURE: Signature of the accordance with saction of this document constitution that the facts rested ber Jeffrey Gifford	specific and cannot be more than five business days prior or a member. In a suthorized representative of a member. In 608.408(3), Florida Statutes, the execution are a affirmation under the penalties of perjury rein are true.
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