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(R	Requestor's Name)	
A)	Address)	
A)	Address)	
(C	City/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Nar	me)
(C	Document Number)	· ,
Certified Copies	Certificates	s of Status
		. <u></u>
Special Instructions to	to Filing Officer:	

Office Use Only



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	ACCOUNT	NO.	:	072100000032
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REFERENCE :

COST LIMIT : \$ 125.00

ORDER DATE: August 1, 2007

ORDER TIME : 11:57 AM

ORDER NO. : 036245-005

CUSTOMER NO: 7541620

DOMESTIC FILING

NAME: CTC INVESTOR LLC

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman - EXT. 2908

EXAMINER'S INITIALS:

O'NIS MESSON

ARTICLE I - Name:	is:			
The name of the Limited Liability Company	is:			
	Total 2			
CTC Investor LLC	The state of the s			
(Must end with the words "Limited Lie	ability Company, "L.L.C.," or "LLC.")			
AMMONETA	Opt .			
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liability Company is:			
The maning address and sheet address of the	principal office of the Emitted Etaolity Company is:			
Principal Office Address:	Mailing Address:			
235 Third Street South, Ste. 300	235 Third Street South, Ste. 300			
St. Petersburg, FL 33701	St. Petersburg, FL 33701			
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Registration and the Florida registration.) The name and the Florida street address of the	gistered Agent. You must designate an individual or another			
Corporation Service C	ompany			
Name				
1201 Hays Street				
Florida street address (P.O. Box NOT acceptable)				
Tallahassee	_{FL} 32301			
City, State	, and Zip			
liability company at the place designated ir registered agent and agree to act in this capac statutes relating to the proper and complete p accept the obligations of my position as rep	o accept service of process for the above stated limited this certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and gistered agent as provided for in Chapter 608, F.S			
Corporation Service (Company Heather Chapman as its agent			

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

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:
MGR	Echelon LLC 235 Third Street South, Ste. 300 St. Petershurg, FL. 33701
·····	
(Use attachment if necessary)	
RTICLE V: Effective date, if other than th	ne date of filing: (OPTIONAL) be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
Signature of a memb	per or an authorized representative of a member.
(In accordance with s of this document cont that the facts stated	stitutes an affirmation under the penalties of perjury herein are true.)
	Executive Vice President

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)

Typed or printed name of signee