

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H07000241215 3)))



H0700024121534B05A

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : GERALD WEINBERG, P.C.

Account Number : 120030000043

Phone

: (800)342-9856

Fax Number

: (800)354-3381

DIVISION OF CONTRACT

FLORIDA/FOREIGN LIMITED LIABILITY CO.

FIT PROPERTIES II HOLDING LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help BLT **ARTICLE I - Name:**

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:			
FIT PROPERTIES	II HOLDING LLC		
(Must end with the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of the pr	ringinal office of the Limited Lightlity Comm	i oi waa	
The initialing address and squee address of the pi	thicipal office of the Difficed Diability Comp	any is	
Principal Office Address:	Mailing Address:	~ .*	
8131 PEA TREE COURT	8131 PEA TREE COURT	٠.	:
TRINITY, FL 34655	TRINITY, FL 34655		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)	l Office, & Registered Agent's Signature: tered Agent. You must designate an individual or another		1.7. = : :
The name and the Florida street address of the r	registered agent are:	07 SEP	SECI
MARK CAN	MACHO	:P 2	えだ。
Name		7	CRA
8131 PEA TREE CO	DURT	PH	RY OF STATE CORPORATIONS
Florida street add	dress (P.O. Box <u>NOT</u> acceptable)	••	RATA
TRINITY	_{FL} 34655	<u>.</u>	NO.
City, State, a	and Zip		S

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 of registered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

(H070002412153)

(J. 27. 2007 1:26PM 41 215 3)

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

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

	8131 PEA TREE COURT TRINITY, FL 34655
	TRINITY, FL 34655
	•
•	
_ '	All and All an
,	
(Use attachment if necessary	y)
v vo vo Torradora desa de sala	er than the date of filing: (OPTIO
fective date is listed, the dat	te must be specific and cannot be more than five business
days after the date of filing	
	•
<u>required</u> signaturi	E: /
<u>REQUIRED</u> SIGNATURI	E:
required signaturi	Month Course Ala
	E: May be a market of a member.

Page 2 of 2

(H070002412153)