Division of Corporations Public Access System

# **Electronic Filing Cover Sheet**

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.

(((H07000265280 3)))



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) 617-6383

: LIBERTY INVESTMENT PROPERTIES INC Account Name

Account Number : I20070000017 Phone : (407)774-8818

: (407)774-6697 Fax Number

AM 8:

LORIDA/FOREIGN LIMITED LIABILITY CO.

Liberty VP Meriden, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE 1 - Name

The name of this limited liability company is LIBERTY VP MERIDEN, LLC (the "Company").

#### ARTICLE II - Address

The mailing address and street address of the principal office of the Company is:

2200 Lucien Way, Suite 410 Maitland, Florida 32751

#### ARTICLE III - Existence and Duration

The Company shall commence its existence on the date that these Articles of Organization are filed with the Secretary of the State of Florida, and its duration shall be perpetual unless sooner dissolved by law.

## ARTICLE IV - Management

The Company is a member managed Company.

## ARTICLE V - Registered Agent

The name and street address of the initial registered agent of the Company is:

Wm. Michael Mikkelson 2200 Lucien Way, Suite 410 Maitland, Florida 32751

Dated: October 25, 2007.

Wm. Michael Mikkelson, Authorized Representative

(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.)

### REGISTERED AGENT ACCEPTANCE

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.

WM. MICHAEL MIKKELSON, Registered Agent

By: Mr. Musked Mile

Dated: October 25, 2007.

2007 OCT 26 AM 8: 3
SECRETARY OF STATE
TALL ANASSEE FLORID