

607000 111 804

Florida Department of State
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.

((H07000271869 3)))



H070002718693ABC7

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

From:

Account Name : DELOACH & HOFSTRA, P.A.
Account Number : I19990000123
Phone : (727) 397-5571
Fax Number : (727) 393-5418

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2007 NOV -5 AM 8:44

FILED

FLORIDA/FOREIGN LIMITED LIABILITY CO.

EJB 118TH PLACE SEVEN UNITS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

RECEIVED

07 NOV -5 PM 12:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

607-111804
AR

((H07000271869 3)))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

EJB 118TH PLACE SEVEN UNITS, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:8640 SEMINOLE BOULEVARD
SEMINOLE, FL 33772**Mailing Address:**8640 SEMINOLE BOULEVARD
SEMINOLE, FL 3772**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature**

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

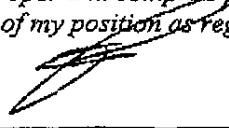
PETER T. HOFSTRA

Name

8640 SEMINOLE BOULEVARDFlorida street address (P.O. Box **NOT** acceptable)SEMINOLE, FL 33772

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.


 Registered Agent's Signature (REQUIRED)

(CONTINUED)

((H07000271869 3))) Page 1 of 2

 FILED
 2007 NOV -5 AM 8:44
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

(((H07000271869 3)))

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

DENNIS R. DELOACH, JR., CO-TRUSTEE OF THE
 E.J. BICKLEY TRUST
 8640 Seminole Blvd., Seminole, FL 33772

MGRM

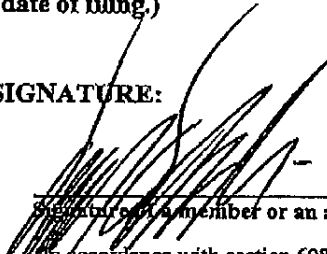
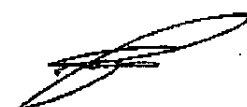
PETER T. HOFSTRA, CO-TRUSTEE OF THE E.J.
 BICKLEY TRUST
 8640 Seminole Blvd., Seminole, FL 33772

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)
 (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

FILED
 2007 NOV -5 AM 8:44
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(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.)

DENNIS R. DELOACH, JR./PETER T. HOFSTRA

Typed or printed name of signee

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)

(((H07000271869 3)))