L07000118164

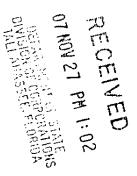
| (R | equestor's Name) | |
|-------------------------|---------------------|-----------|
| (A | ddress) | • |
| (A | ddress) | |
| (C | ity/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (B | usiness Entity Nan | ne) |
| (D | ocument Number) | |
| Certified Copies | Certificates | of Status |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| | | |
| | | |

٠. ٠

Office Use Only



800108426588





19K 11/27



| ACCOUNT NO. : 072100000032 |
|---|
| REFERENCE: 332242 1803460 |
| AUTHORIZATION: |
| COST LIMIT : \$ 125.00 |
| ORDER DATE: November 27, 2007 |
| ORDER TIME: 10:33 AM |
| ORDER NO. : 332242-005 |
| CUSTOMER NO: 4803460 |
| · · · · · · · · · · · · · · · · · · · |
| DOMESTIC FILING |
| NAME: 4979 CHASE OAKS DRIVE, LLC |
| |
| EFFECTIVE DATE: |
| ARTICLES OF INCORPORATION |
| CERTIFICATE OF LIMITED PARTNERSHIP XX · ARTICLES OF ORGANIZATION |
| PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: |
| CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING |
| CONTACT PERSON: Doreen Wallace - EXT. 2928 |
| EXAMINER'S INITIALS: |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is 4979 Chase Oaks Drive, LLC.

ARTICLE II - Address:

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

4979 Chase Oaks Drive, LLC, c/o Madeleine C. Teele, 4426 Chase Oaks Drive, Sarasota, FL 34241.

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature:

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

Madeleine C. Teele Name

4426 Chase Oaks Drive Sarasota, FL 34241

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 completed performance of may 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 Page 1 of 2

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

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

Title

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGRM

Madeleine C. Teele 4426 Chase Oaks Drive Sarasota, FL 34241

SIGNATURE:

authorized representative of a me

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.)

S. Jason Teele, Esq.
Typed or printed name of signee