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To:  
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From:  
Account Name : GRAHAM, CLARK, JONES, BUILDER, PRATT & MARKS  
Account Number : I19990000278  
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FLORIDA/FOREIGN LIMITED LIABILITY CO

LAKE GIBSON LOT 2, LLC

Certificate of Status	1
Certified Copy	1
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**ARTICLES OF ORGANIZATION  
OF  
LAKE GIBSON LOT 2, LLC**

The undersigned, desiring to form a limited liability company under and pursuant to Chapter 608, *Florida Statutes*, does hereby certify as follows:

**ARTICLE I - NAME**

The name of the limited liability company is LAKE GIBSON LOT 2, LLC (the "Company").

**ARTICLE II - ADDRESS**

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

1071 West Morse Boulevard, Suite 200  
Winter Park, FL 32789

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE AND REGISTERED AGENT'S SIGNATURE**

The name and Florida street address of the registered agent are

Michael A. Collard  
1071 West Morse Boulevard, Suite 200  
Winter Park, FL 32789

Having been named as registered agent and to accept service of process for LAKE GIBSON LOT 2, LLC, 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*.

\_\_\_\_\_  
Michael A. Collard

**ARTICLE IV - MANAGER**

The name and address of the initial Manager is as follows:

Michael A. Collard  
1071 West Morse Boulevard, Suite 200  
Winter Park, FL 32789

(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.)

\_\_\_\_\_  
Michael A. Collard

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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