L070000122344

Office Use Only



800112752708

RECEIVED

OT DEC 10 PM 2: 46

OURS OF THE PROPERTY OF THE PROP

07 DEC 10 PM 3: 48
SECRETARY OF STATE
ALLAHASSEF, FLORIDA

BK 12/10



ACCOUNT NO. : 072100000032

REFERENCE: 352771 4338458

~ ^

AUTHORIZATION : ____

COST LIMIT : (\$\)125.00

ORDER DATE: December 10, 2007

ORDER TIME : 12:36 PM

ORDER NO. : 352771-005

CUSTOMER NO: 4338458

DOMESTIC FILING

NAME: SF NILE GARDENS, LLC

EFFECTIVE DATE:

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Cindy Harris - EXT. 2937

EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	as, LLC ity Company, "L.L.C.," or "LLC.")
SF Nile Garder	ns, LLC
(Must end with the words "Limited Liabili	ity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1661 Worthington Road	1661 Worthington Road
Suite 100	Suite 100
West Palm Beach, FL 33409	West Palm Beach, FL 33409
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the registration.	ered Agent. You must designate an individual or another
Corporation Service Company	
Name	
1201 Hays Street	
Florida street address (P.O. Box NOT acceptable)	
Tallahassee	FL 32301
City, State, a	nd Zip
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	accept service of process for the above stated limited his certificate, I hereby accept the appointment as v. I further agree to comply with the provisions of all reformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S

Corporation Service Company
BY: Cynthia L. Harris
Asst. Vice President
Registered Agent's Signature (REQUIRED)

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

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

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Membe	William B. Shepro 1661 Worthington Road, Suite 100
MGR	West Palm Beach, FL 33409 William H. Stolberg 1661 Worthington Road, Suite 100 West Palm Beach, FL 33409
·	
(Use attachment if necessary)	
ARTICLE V: Effective date, if other the	han the date of filing: (OPTIONAL) must be specific and cannot be more than five business days prior
<u>REQUIRED</u> SIGNATURE:	
lus	lean H Solling

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.)

William H. Stolberg, Director

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)