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SECRETARY OF STATE

W1-125031

COVER LETTER

Division of Corp				
SUBJECT: CROSL	AND BEVERLY H	HILLS, LLC	,	
JOBSECT.		l Liability Company)		
The enclosed Articles of (Organization and fee(s) are su	ubmitted for filing.	<u>'</u>	
Please return all correspor	ndence concerning this matte	r to the following:		
MELANIE N	MASTALSKI			
	(1	Name of Person)		
CROSLAN	D, LLC			
	(1	Firm/Company)		
227 WEST	TRADE STREET	, SUITE 800		
		(Address)		
CHARLOT	TE, NC 28202			
	(City/	State and Zip Code)		
For further information co	oncerning this matter, please of	call:		
MELANIE MAST	TALSKI f Person)	at (704) 561-522! (Area Code & Daytime Tele		
Enclosed is a check for	the following amount:		TAR	
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is reaclossed)	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C		

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company i	s:			
CROSLAND BEVERLY HILLS, L				
(Must end with the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liab	oility Company is:		
Principal Office Address:	Mailing Address:			
227 WEST TRADE ST., SUITE 800 CHARLOTTE, NC 28202	SAME			
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.)	red Office, & Registered Agent's a gistered Agent. You must designate an individual	Signature: ual or another		
The name and the Florida street address of th	2001 SE(TALI			
PERRY J. READE	R, C/O CROSLAND	2001 DEC 14 SECRETARY		
	ulevard, Suite 200 address (P.O. Box NOT acceptable)	E ST S		
, , , ,	FL SEOZZ	O: 48 TATE ORIDA		
Having been named as registered agent and	to accept service of process for the a	ibove stated limited		

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)
Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Titl</u> "M	<u>le:</u> GR" = Manag	e r	Name and Address:			
		aging Member				
MGF	3		CROSLAND, LLC			,
			227 WEST TRADE ST., SUITE 800			
			CHARLOTTE, NC 28202			
		_	<u>-</u>			
	•					
						
						
		-				
	•		,			
(Us	se attachment i	if necessary)				
A DIMICAL D	** E000 /*		0.00	`~ nm		
ARTICLE	V: Effective (date, if other than the da	te of filing: (OPTIO	NAL)	
			pecific and cannot be more than five bu	isiness (iays pi	rior
to or 90 day	ys after the da	ite of filing.)				
RE	QUIRED SIG	CNATURE:				
<u></u>	<u> </u>	^	•		~	
		1 11 - 1		SE	2007 DEC 14	
		(Atthe How		E CR	30	
		Signature of a member of	r an authorized representative of a member.		C	micrat)
		(In accordance with costic	n 608.408(3), Florida Statutes, the execution	SSE		F 121 102 104
•		of this document constitute	es an affirmation under the penalties of perjury	G		
		that the facts stated here	in are true.)	77 (7)	AM 10:	
	•	CATHLEEN HARDN	MAN, VP of Crosland, LLC, Manager	CRETARY OF STATE LAHASSEE.FLORIDA	Ö	.46. A 25.
		Typed	or printed name of signee	ᇹᅲ	91	
			•	3		

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)