

L07000125073

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

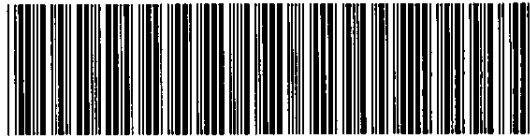
(Business Entity Name)

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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

PRC 12/18

CORPDIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: PATRICIA TADLOCK

DATE: 12/14/2007

REF. #: 000176.78657

CORP. NAME: BIRCH RD LLC

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- | | | |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

STATE FEES PREPAID WITH CHECK# 523974 FOR \$ 155.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ COST LIMIT: \$ _____

PLEASE RETURN:

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 17, 2007

PATRICIA TADLOCK
CORPDIRECT AGENTS
TALLAHASSEE, FL

SUBJECT: BIRCH RD LLC
Ref. Number: W07000060753

PLEASE GIVE ORIGINAL SUBMISSION
DATE AS FILE DATE.

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TALLAHASSEE, FLORIDA

We have received your document for BIRCH RD LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be titled ARTICLES OF ORGANIZATION.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr
Regulatory Specialist II

Letter Number: 407A00070273

PLEASE GIVE ORIGINAL SUBMISSION
DATE AS FILE DATE.

ARTICLES OF ORGANIZATION

OF

BIRCH RD LLC

FILED
07 DEC 15 PM 12:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

This Certificate of Formation pertains to the formation of Birch Rd LLC, a limited liability company organized under the Florida Limited Liability Company Act, as follows:

1. The name of the limited liability company is Birch Rd LLC, (the "Company").
2. The address of the Company's principal office in the State of Florida is 401 East Las Olas Blvd, Suite 130-324, Fort Lauderdale, FL 33301.
3. The address of the Company's registered office in the State of Florida is 515 E. Park Avenue, Leon County, Tallahassee, FL 32301. The registered agent at such address is CorpDirect Agents, Inc.

IN WITNESS WHEREOF, the undersigned has duly executed this Certificate of Formation as of the 14th day of December, 2007.


Ramola Motwani, Authorized Person

CONSENT OF REGISTERED AGENT

OF

BIRCH RD LLC

Having been named as registered agent to accept service of process for the above-referenced limited liability company at the place designated herein, the undersigned confirms familiarity with and accepts the appointment as registered agent and agrees to act in this capacity.

 **Assistant Secretary**

Name: **Ricky Soto**
Corp Direct Agents, Inc.
Date: December 14, 2007