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(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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FEB 5 2008

EXAMINER



DE SEUTIBE SUMPARI
ACCOUNT NO. : 072100000032
REFERENCE: 430349 5011958
AUTHORIZATION: Spelle Man
COST LIMIT : \$ 125.00
ORDER DATE : February 4, 2008
ORDER TIME: 2:32 PM
ORDER NO. : 430349-005
CUSTOMER NO: 5011958
DOMESTIC FILING
NAME: PRIMA VISTA TERRACE, LLC
EFFECTIVE DATE:
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Carina L. Dunlap - EXT. 2951
EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Prima Vista Terrace, LLC
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Compar

Principal Office Address:

Mailing Address:

THE LEWIS TO

1275 Lake Heathrow Lane	1275 Lake Heathrow Lane
Suite 115	Suite 115
Heathrow, FL 32746	Heathrow, FL 32746

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

N. Dwayne Gray, Jr., Esq.

201 East Pine Street, Suite 500

Florida street address (P.O. Box NOT acceptable)

Orlando, Florida 32801

City, State, and Zip

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.,

(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:

MGR	Jonathan L. Wolf
	1275 Lake Heathrow Lane, Suite 115
	Heathrow, FL 32746
	
(Use attachment if necessary)	

REQUIRED SIGNATURE:

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.)

N. Dwayne Gray, Jr., Esq.

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)

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