L08000015202

(Requestor's Name)
(Address)
(1881-855)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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EXAMINER



ACCOUNT NO. : 072100000032	
REFERENCE: 441081 4306601	
AUTHORIZATION: Sprelle Ble man	
COST LIMIT: \$ 1/9.00	
ORDER DATE : February 12, 2008	. 4.0
ORDER TIME : 10:58 AM	ALLES OF THE
ORDER NO. : 441081-005	AHARIA I
CUSTOMER NO: 4306601	E P
*	SEE, FLOOR
DOMESTIC FILING	RIDA
NAME: MC KEY LARGO, 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: Doreen Wallace - EXT. 2928	
EXAMINER'S INITIALS	•

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
MC Key Largo, LLC	
(Must end with the words "Limited Liability	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	ncipal office of the Limited Liability Company is:
·	
Principal Office Address:	Mailing Address:
c/o JDI Realty LLC	c/o JDI Realty LLC
853 N. Elston	853 N Elston
Chicago, IL 60622	Chicago, IL 60622
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	ared Agent. You must designate an individual or another
The name and the Florida street address of the re	
Corporation Service Con	npany Mo P
Name	F. 22
1201 Hays Street	F. ORD
Florida street addr	ess (P.O. Box NOT acceptable)
Tallahassee	FL 32301
City, State, an	nd 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..

Corporation Service Company

Registered Agent's Signature (REQUIRED)

Doreen Wallace Assistant Vice President

(CONTINUED)
Page 1 of 2

Title: "MGR" = Manager "MGRM" = Managing M	Name and Address:
MGR	Kevin Connor
	853 N. Elston
	Chicago, IL 60622
MGR	Jeff Acder
	853 N_Elston
	Chicago, IL 60622
481 N 10	
(Use attachment if necess	ary)
LE V: Effective date if o	ther than the date of filing: (OPTION
	date must be specific and cannot be more than five business de
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Tective date is listed, the days after the date of fili REQUIRED SIGNATU Signatur (In according to this do	RE:

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

Filing Fees: