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EXAMINER

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

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

FILING COVER SHEET ACCT. #FCA-14

CONTACT: <u>ASHLEY SMITH</u>

DATE: <u>03-19-2008</u>

REF. #: 000174.83534

CORP. NAME: SCP/ABL VINES, LLC

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() ARTICLES OF INCORPORATION	() ARTICLES OF AMENDMENT	() ARTICLES OF DISSOLUTION
() ANNUAL REPORT	() TRADEMARK/SERVICE MARK	() FICTITIOUS NAME
() FOREIGN QUALIFICATION	() LIMITED PARTNERSHIP	Ø	XX) LIMITED LIABILITY
() REINSTATEMENT	() MERGER	() WITHDRAWAL
() CERTIFICATE OF CANCELLATION				
() OTHER:				

STATE FEES PREPAID WITH CHECK# 525187 FOR \$ 155.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

 COST LIMIT: \$_____

 PLEASE RETURN:

 (XX) CERTIFIED COPY
 () CERTIFICATE OF GOOD STANDING

 () CERTIFICATE OF STATUS

 Examiner's Initials



ARTICLES OF ORGANIZATION

SCP/ABL VINES, LLC, a Florida limited liability company

ARTICLE I NAME

The business and affairs of the Limited Liability Company shall be conducted under the name of:

SCP/ABL VINES, LLC

ARTICLE II PRINCIPAL OFFICE

The street address and the mailing address of the principal place of business of the Limited Liability Company within the State of Florida shall be:

25110 Bernwood Drive Suite 101 Bonite Springs, FL 34135

ARTICLE III INITIAL REGISTERED AGENT/OFFICE

The registered office of the Limited Liability Company and its initial registered agent shall be:

Brit E. Svoboda 25110 Bernwood Drive Suite 101 Bonita Springs, FL 34135

ARTICLE IV MANAGEMENT AND POWERS

The business and affairs of the Limited Liability Company shall be managed by one or more Managers elected as provided in the Operating Agreement of the Limited Liability Company.

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IN WITNESS WHEREOF, these Articles of Organization have been executed as of the day of <u>Manual</u>, 2008.

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WITNESSES:

Print Name 10-Anna and

Brit E. Svoboda

Print Name K Rasmus Mark

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"MANAGER"

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 608.415 of the Florida Statutes, the undersigned Limited Liability Company submits the following statement to designate a registered office and registered agent in the State of Florida.

1. The name of the Limited Liability Company is:

SCP/ABL VINES, LLC

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

Brit E. Svoboda 25110 Bernwood Drive Suite 101 Bonita Springs; FL 34135

Having been named 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 relative to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

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3-19-00 Date:

BHÉ E. Syoboda

"REGISTERED AGENT"

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