

**L08000035228**

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(Requestor's Name)

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(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

\_\_\_\_\_  
(Business Entity Name)

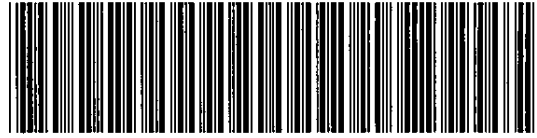
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APR - 8 2008  
**EXAMINER**



**500122252935**

04/07/08--01027--031    \*\*250.00

**FILED**  
**SECRETARY OF STATE**  
**DIVISION OF CORPORATION**  
**08 APR - 7 AM 8:16**

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: 12539 Floridays Resort Drive 405, LLC**  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Sandra Zabelinski**  
(Name of Person)

**Jonathan H. Green & Associates, P.A.**  
(Firm/Company)

**799 Brickell Plaza, Suite 700**  
(Address)

**Miami, Florida 33131**  
(City/State and Zip Code)

For further information concerning this matter, please call:

**Sandra Zabelinski** at ( **305** ) **372.5100**  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$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 enclosed).

**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 Circle  
Tallahassee, FL 32301

**ARTICLES OF ORGANIZATION FOR**  
**FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I**

**COMPANY NAME**

The name of the Limited Liability Company is:

12539 FLORIDAYS RESORT DRIVE 405, LLC

**ARTICLE II**

**ADDRESS**

The mailing address and street address of the principal office of 12539 FLORIDAYS RESORT DRIVE 405, LLC is:

10271 Key Plum Street,  
Plantation, Florida 33324

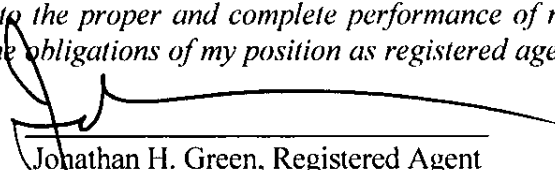
**ARTICLE III**

**REGISTERED AGENT, REGISTERED OFFICE**  
**AND REGISTERED AGENT'S SIGNATURE**

The name and the Florida street address of the Registered Agent are:

Jonathan H. Green & Associates, P.A.  
799 Brickell Plaza, Suite 700  
Miami, FL 33131

*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.*


  
Jonathan H. Green, Registered Agent

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**ARTICLE IV**  
**MANAGEMENT**

12539 FLORIDAYS RESORT DRIVE 405, LLC is to be managed by one (1) member and is, therefore, a single member managed company. The name and address of the Managing Member is as follows:

**WILKOV FAMILY LIMITED PARTNERSHIP, Manager/Member**  
10271 Key Plum Street,  
Plantation, Florida 33324

  
\_\_\_\_\_  
HOWARD WILKOV, as General Partner