

LD80000036278

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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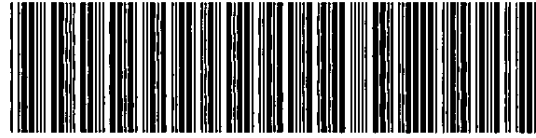
(Business Entity Name)

(Document Number)

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APR 10 2008  
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2008 APR - 8 AM 11: 06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FILED**

**ARTICLES OF ORGANIZATION OF  
1601 NW 55<sup>th</sup> Place, LLC  
A FLORIDA LIMITED LIABILITY COMPANY**

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

**ARTICLE I — NAME**

The name of the Limited Liability Company is 1601 NW 55<sup>th</sup> Place, LLC.

**ARTICLE II — ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company are:

Street Address: 4710 SW 103rd Way  
Gainesville, Florida 32608

Mailing Address: 4710 SW 103rd Way  
Gainesville, Florida 32608

**ARTICLE III — REGISTERED AGENT AND REGISTERED OFFICE**

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

Registered Agent Charles W. Littell  
4041 NW 37th Place - Suite B  
Gainesville, Florida 32606

Registered Office: 4041 NW 37th Place - Suite B  
Gainesville, Florida 32606

**ARTICLE IV – MANAGING MEMBER**

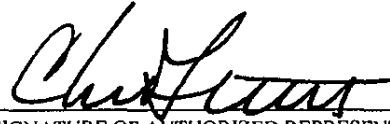
The name and address of the managing member is:

Monika G. Kirkpatrick 4710 SW 103rd Way  
Gainesville, Florida 32608

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledged them to be my act this 3rd day of April, 2008.

2008 APR -8 AM 11:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FILED**

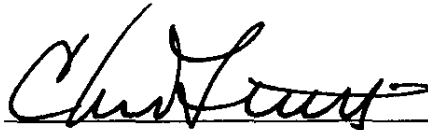


SIGNATURE OF AUTHORIZED REPRESENTATIVE

(In accordance with section 608.408(3), Florida Statutes, the execution of this statement constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

**STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT**

I hereby accept the designation as registered agent to accept service of process for the above stated limited liability company at the place designated in this statement. 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 under Chapter 608, Florida Statutes.



SIGNATURE OF REGISTERED AGENT

TYPED OR PRINTED NAME: Charles W. Littell

**FILED**

2008 APR -8 AM 11:06

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA