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MAY 1 9 2008

EXAMINER



CORPORATION SERVICE COMPANY

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ACCOUNT	INO.	- 1	072

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REFERENCE: 575448

7448543

AUTHORIZATION :

COST LIMIT :

ORDER DATE: May 19, 2008

ORDER TIME : 10:11 AM

ORDER NO. : 575448-005

CUSTOMER NO: 7448543

# DOMESTIC FILING

NAME: UBOR C ASSOCIATES, LLC

### EFFECTIVE DATE:

	ARTICLES OF INCORPORATION
	CERTIFICATE OF LIMITED PARTNERSHIP
XX	ARTICLES OF ORGANIZATION
PLEASE	RETURN THE FOLLOWING AS PROOF OF FILING:
	_ CERTIFIED COPY
XX	_ PLAIN STAMPED COPY
	_ CERTIFICATE OF GOOD STANDING
CONTACT	F PERSON: Susie Knight - EXT. 2956

EXAMINER'S INITIALS:

OBTIM 19 PH 2: 53

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	d Company" or their abbreviation "LLC," or "L.C.," or "L.C.," incipal office of the Limited Liability Company is:
The name of the Limited Liability Company is:	
UBOR C Associates, LLC	
(Must end with the words "Limited Liability Company, "Limite	d Company" or their abbreviation "LLC," or "L.C.,"
ARTICLE II - Address:	4.
	incipal office of the Limited Liability Company is:
The maining address and shoot address of the pr	morphic of the Emilion Emilion Company
Principal Office Address:	Mailing Address:
8441 Cooper Creek Blvd	8441 Cooper Creek Bivd
University Park, FL 34201	University Park, FL 34201
(The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)  The name and the Florida street address of the registration.	
David H. Baldauf	
Name	
8441 Cooper Creek Blvd	
Florida street add	ress (P.O. Box <u>NOT</u> acceptable)
University Park,	FL 32301
City, State, a	and Zip
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete pe	accept service of process for the above stated limited his certificate, I hereby accept the appointment as v. I further agree to comply with the provisions of all rformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature (REQUIRED)

(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:

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGR	David H. Baldauf
	8441 Cooper Creek Blvd
	University Park, FL 34243
(Use attachment if necessary)	
"IF V. Effective date if other than	n the date of filing: (OPTIONAL
enective date is listed, the date mi	ust be specific and cannot be more than five business days
days after the date of filing.)	
REQUIRED SIGNATURE:	
1 / ( A B	M

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

By: David H. Baldauf, Manager

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)