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	To: Division of Corporations Fax Number : (850)617-6383 From: Carrie L. Ramos, Paralegal - PLEASE FAX CONFIRMATION TO 407 244-5690 Account Name : GRAYROBINSON, P.A ORLANDO Account Number : I20010000078 Phone : (407)843-8880 Fax Number : (407)244-5690
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GRAYROBINSON

407 418 6580 P.02/02

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 ~ Name:

The name of the Limited Liability Company is:

EOLA CHERRY PLAZA, LLC

ARTICLE II - Address:

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

301 E. PINE STREET, SUITE 1400 ORLANDO, FL 32801

ARTICLE III • Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

PHILLIP R. FINCH 301 E. PINE STREET, SUITE 1400 ORLANDO, FLORIDA 32801

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.

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REGISTERED AGENT'S SIGNATURE	CRET	AVA	
Article IV - Manager(s) or Managing Member(s);	ARY O	28	E
The Limited Liability Company is to be managed by one or more managers and is, the "manager-managed" limited liability company.		25	Б
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AUTHORIZED REPRESENTATIVE'S SIGNATURE

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

> PHILLIP R. FINCH 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)

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