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GRAYROBINSON

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Florida Department of State
Division of Corporations
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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
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FLORIDA/FOREIGN LIMITED LIABILITY CO.

Windcrest Woods, LLC

Certificate of Status	1
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EXAMINER

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ARTICLES OF ORGANIZATION
FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name:

The name of the Limited Liability Company is:

WINDCREST WOODS, LLC

ARTICLE II - Address:

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

605 EAST ROBINSON STREET, SUITE 340
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:

LISA A. SPECHT
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.



REGISTERED AGENT'S SIGNATURE

Article IV – Manager(s) or Managing Member(s):

The Limited Liability Company is to be managed by one or more managers and is, therefore, a "manager-managed" limited liability company.



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.

LISA A. SPECHT

Typed or printed name of signer

FILING FEES:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$30.00 Certified Copy (OPTIONAL)
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