

# L08000063966

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Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**8633 herbison, llc**

Certificate of Status	0
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**EXAMINER**

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**ARTICLES OF ORGANIZATION OF  
8633 HERBISON, LLC**

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

**ARTICLE I — Name:**

The name of the Limited Liability Company (hereinafter referred to as the "Company") is: "8633 Herbison, LLC".

**ARTICLE II — Address:**

The mailing address and street address of the principal office of the Company is: 6057 Old Court Street, North Port, FL

**ARTICLE III — Registered Agent and Registered Office**

The name and the Florida street address of the initial registered agent are: W. Scott Van Ness, Esq., The Law Offices of Van Ness & Van Ness, P.A., 46 N. Washington Blvd., Suite 9, Sarasota, FL, 34236.

**ARTICLE IV — Management**

The company is to be managed by a Managing Member.

**ARTICLE V — Limitation on Agency Authority of Members:**

Pursuant to section 608.4235 of the Florida Limited Company Act, no member of the Company shall be an agent of the Company solely by virtue of being a member.

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 1<sup>st</sup> day of July, 2008.

  
Signature of authorized Representative

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

W. Scott Van Ness  
Typed name of signee

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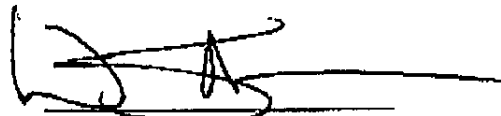
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**STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT  
8633 Herbison, LLC.**

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.

(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.)



Signature of Registered Agent

W. Scott Van Ness

Typed or printed name of Signee

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