

LO8000071205

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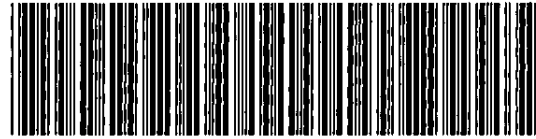
(Business Entity Name)

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08 JUL 24 PM 3:45
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

B. KOHR

JUL 24 2008

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 660165 81442A

AUTHORIZATION

COST LIMIT : \$ 155.00

ORDER DATE : July 24, 2008

ORDER TIME : 11:23 AM

ORDER NO. : 660165-005

CUSTOMER NO: 81442A

FILED
08 JUL 24 PM 3:45
TALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: SIESTA BEACH HOUSE, LLC

EFFECTIVE DATE:

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

CONTACT PERSON: Cindy Harris - EXT. 2937

EXAMINER'S INITIALS: _____

FILED
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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY
OF
SIESTA BEACH HOUSE, LLC.
A FLORIDA LIMITED LIABILITY COMPANY

The undersigned member, for the purpose of forming a limited liability company under the Chapter 608, Florida Statutes, hereby adopts the following Articles of Organization for Florida Limited Liability Company.

ARTICLE I NAME

The name of the limited liability company shall be:

SIESTA BEACH HOUSE, LLC., A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE II PRINCIPAL OFFICE

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

1400 BURGOS DRIVE
SARASOTA, FLORIDA 34238

ARTICLE III NATURE OF BUSINESS

The limited liability company may engage in any activity or business permitted under the laws of the United States and of this state.

ARTICLE IV - EXISTENCE

The existence of this company shall be perpetual.

ARTICLE V REGISTERED AGENT

The name and the Florida street address of the registered agent is:

TAMARA M. BERRYMAN
1400 BURGOS DRIVE, SARASOTA, FLORIDA 34238

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.


TAMARA M. BERRYMAN

ARTICLE VI - MANAGEMENT

There shall be one manager and, therefore, known as the managing member. The names and addresses of the managing member is:

ROCHELLE ROTH 559 WEST MERRILL STREET
BIRMINGHAM, MICHIGAN 48009

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.


ROCHELLE ROTH
MANAGING MEMBER

STATE OF Michigan
COUNTY OF Oakland

The foregoing instrument was acknowledged before me on July 17, 2008, by
ROCHELLE ROTH as Managing Member and Registered Agent, who is personally known to me or
who produced Driver's License as identification.

(SEAL)


NOTARY PUBLIC
MY COMMISSION EXPIRES:

PATRICIA NELSON
Notary Public, State of Michigan
County of Oakland
My Commission Expires Oct. 17, 2011
Acting in the County of _____