

Division of Corporations

Page 1 of 1

Florida Department of State
Division of Corporations
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To:

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

From:

CAM MATHIEWS
Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A.
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Avion Point West, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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Corporate Filing Menu

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G. MCLEOD

AUG 27 2008

EXAMINER

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**ARTICLES OF ORGANIZATION
OF
Avion Point West, LLC**

The undersigned, acting as organizer of this limited liability company pursuant to Chapter 608 of the Florida Statutes, hereby forms a limited liability company under the laws of the State of Florida and adopts the following Articles of Organization for such limited liability company:

ARTICLE I - Name

The name of the limited liability company is **Avion Point West, LLC** (the "Company").

ARTICLE II - Address

The mailing address and street address of the principal office of the Company are 1320 Northridge Drive, Longwood, Florida 32750.

ARTICLE III - Registered Agent and Registered Office

The name and the Florida street address of the registered agent for the Company are JAMES P.A. THOMPSON, 1320 Northridge Drive, Longwood, Florida 32750.

ARTICLE IV - Management

The Company is to be a manager managed company. The name and address of the initial manager of the Company are:

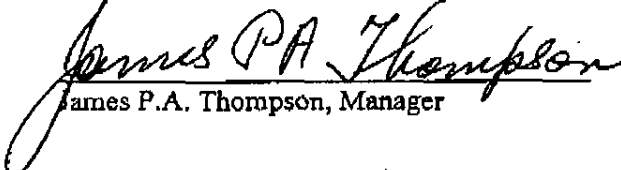
<u>Name</u>	<u>Address</u>
James P.A. Thompson	1320 Northridge Drive Longwood, Florida 32750

ARTICLE V - Effective Date

The effective date of these Articles of Organization, and the beginning of the existence of the Company, shall be the date of filing of these Articles of Organization with the Florida Department of State.

22 The undersigned Manager has made and subscribed these Articles of Organization this day of August, 2008.

Under penalties of perjury the undersigned Member declares that he has read the foregoing and knows the contents thereof and that the facts stated herein are true and correct.


James P.A. Thompson, Manager

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

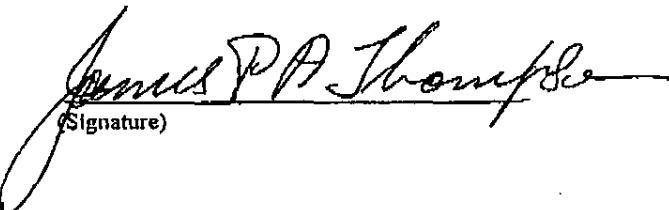
PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 608.415 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the company is: AVION POINT WEST, LLC
1320 Northridge Drive, Longwood, Florida 32750

The name and address of the registered agent and office is:

James P.A. Thompson
(Name)
1320 Northridge Drive
(P. O. Box not acceptable)
Longwood, Florida 32750
(City/State/Zip)

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.


(Signature)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FLORIDA 32314

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