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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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EXAMINER

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ACCOUNT NO. : 072100000032 REFERENCE : AUTHORIZATION : COST LIMIT : ORDER DATE: September 15, 2008 ORDER TIME : 12:37 PM ORDER NO. : 722046-030 CUSTOMER NO: 7448543 DOMESTIC FILING NAME: PECAN RR PARK E, LLC EFFECTIVE DATE: ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY ___ PLAIN STAMPED COPY ____ CERTIFICATE OF GOOD STANDING CONTACT PERSON: Susie Knight - EXT. 2956 EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLES OF ORGANIZATION FOR FE	JRIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name:	
The name of the Limited Liability Company is:	nt.
	1 1 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Pecan RR Park E, LLC	E & R
(Must end with the words "Limited Liability Company, "Limited	Company or their abbraulation 111 C" or 11 C"
(Must end with the words Limited Liability Company, Limited	Company of men aboveviation rise, or Electrical
ARTICLE II - Address:	Ser PA
The mailing address and street address of the pri	ncipal office of the Limited Liability Company is
	On in
Principal Office Address:	Mailing Address:
8441 Cooper Creek Blvd	8441 Cooper Creek Blvd
University Park, FL 34201	University Park, FL 34201
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe	Office, & Registered Agent's Signature:
business entity with an active Florida registration.)	red Agent. 1 on must designate an individual or another
The name and the Florida street address of the re	aistarad agant are
The name and the Florida street address of the re	gistered agent are.
David H. Baldauf	
Name	
8441 Cooper Creek Blvd	
	ess (P.O. Box <u>NOT</u> acceptable)
University Park,	F1 34201
City, State, ar	nd Zip
	ccept service of process for the above stated limited
	is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all
	formance of my duties, and I am familiar with and
	ered agent as provided for in Chapter 608, F.S
. 19 2	

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Me	per —
MGR	David H. Baldauf
the defendance	8441 Cooper Creek Blvd
	University Park, FL 34201

	2 ⁻¹ 10-10-10-10-10-10-10-10-10-10-10-10-10-1
(Use attachment if necessa	
98 89 87 87 87 A 1 1 1 1 1 A 1	d d le CEP
Ar v: Ellective date, il oth Mostiva data is listad, tha di	than the date of filing: (OPTIONAL) nust be specific and cannot be more than five business days prio
days after the date of filin	
REQUIRED SIGNATUR	
XX	2 hA
Signature	

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)

David H. Baldauf, Manager

that the facts stated herein are true.)

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

Typed or printed name of signee