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· TO:

Registration Section

Division of Corporations	
SUBJECT: Castle Pines Golf Villas,	LLC
	d Liability Company)
The enclosed Articles of Organization and fee(s) are s	ubmitted for filing.
Please return all correspondence concerning this matter	er to the following:
Richard Heideman Jr	
(Name of Person)
RHM Hotels and Condominion	ums
	Firm/Company)
3100 Parkway Blvd	
	(Address)
Kissimmee, FL 34747	
(City	/State and Zip Code)
For further information concerning this matter, please	call:
Richard Heideman Jr	at (_407) 624-4026
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\sum \\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name: The name of the Limited Liability Company is:

Castle Pines Golf Villas, LLC		
(Must end with the words "Limited	d Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited Li	ability Company is:
Principal Office Address:	Mailing Address:	
575 NW Mercantile Place Suite 111	3100 Parkway Blvd	
Port St Lucie, FL 34986	Kissimmee, FL 34747	
ARTICLE III - Registered Agent, Regis The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)		
The name and the Florida street address o	f the registered agent are:	SECRE ON SEI
Richard Heidem	an Jr	SEP SEP
	Name	77. OF C 23
3100 Parkway B	lvd.	≥ 300 E

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..

Florida street address (P.O. Box NOT acceptable)

Registered Agent's Signature (REQUIRED)

Kissimmee, FL 34747_{FL}
City, State, and Zip

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

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

GR" = Manager GRM" = Managing Member	RHM Hotels and Condominiums
	RHM Hotels and Condominiums
?	RHM Hotels and Condominiums
	3100 Parkway Blvd
	Kissimmee, FL 34747
MGRM	Richard Heideman Jr
	3100 Parkway Blvd
	Kissimmee, FL 34747
MGRM	Mark Manring
	3100 Parkway Blvd
	Kissimmee, FL 34747
e attachment if necessary)	
•	0/40/00
	n the date of filing: 9/16/08 (OPTIONA
	ust be specific and cannot be more than five business day
ys after the date of filing.)	
	•
QUIRED SIGNATURE:	
//.	
4/5/	
Jock of	
Signature of a/m	ember or an authorized representative of a member.

Filing Fees:

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

that the facts stated herein are true.)

\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee