

L080000/10473

(Requestor's Name)

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

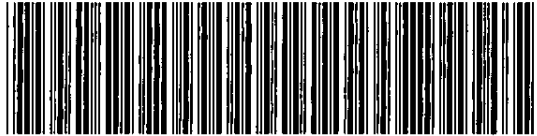
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TALLAHASSEE, FLORIDA

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¹Colorado
²Delaware
³Illinois
⁴New York
⁵Ohio
⁶Wisconsin

November 25, 2008

Florida Department of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Re: Articles of Organization for Florida Limited Liability Company

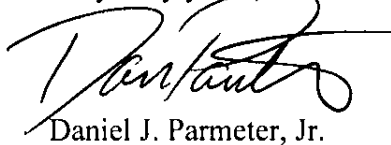
Dear Sir/Madam:

Enclosed for filing, please find two copies of the Articles of Organization for O'Connor Family Investment Company, LLC, along with a check in the amount of \$160.00.

Once filed, please send the Certificate of Status and Certified copy to me in the enclosed envelope.

Should you have any questions, please feel free to contact me.

Very truly yours,



Daniel J. Parmeter, Jr.

Direct Dial/Fax: (616) 632-8020
E-Mail: dparmeter@mmbjlaw.com

cmj
Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: O'Connor Family Investment Company, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Daniel J. Parmeter

(Name of Person)

Mika Meyers Beckett & Jones PLC

(Firm/Company)

900 Monroe Avenue, N.W.

(Address)

Grand Rapids, MI 49503

(City/State and Zip Code)

For further information concerning this matter, please call:

Daniel J. Parmeter

(Name of Person)

at (616) 632-8000

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

O'Connor Family Investment Company, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

c/o James O'Connor

148 Moorings Park Drive, Apartment L-204

Naples, FL 34105

Mailing Address:

c/o James O'Connor

148 Moorings Park Drive, Apartment L-204

Naples, FL 34105

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Laurie Russell

Name

18120 Montelago Court

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

Miromar Lakes, FL 33913

City, State, and 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 as provided for in Chapter 608, F.S..


Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Ms. Laurie Russell

4970 Cascade Road, S.E.

Grand Rapids, MI 49546

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TALLAHASSEE, FLORIDA

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(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:


Signature of a member or an authorized representative of a member.

(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.)

Laurie Russell, Authorized Representative

Typed or printed name of signee

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)