

L 08000113608

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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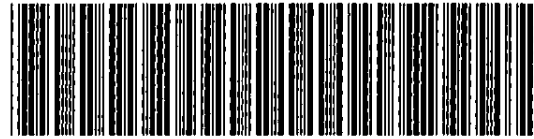
(Business Entity Name)

(Document Number)

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12/8/08

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DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

B. KOHR

DEC 15 2008

EXAMINER



CORPORATION SERVICE COMPANY

EFFECTIVE DATE 12/8/08

ACCOUNT NO. : 072100000032

REFERENCE : 824286 103489A

AUTHORIZATION :

*[Signature]*

COST LIMIT : \$ 125.00

08 DEC 12 AM 8:15  
FILED  
TALLAHASSEE, FLORIDA

ORDER DATE : December 12, 2008

ORDER TIME : 11:30 AM

ORDER NO. : 824286-005

CUSTOMER NO: 103489A

DOMESTIC FILING

NAME: IMPERIAL REALTY MANAGEMENT  
GROUP, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION  
CERTIFICATE OF LIMITED PARTNERSHIP  
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY  
XX PLAIN STAMPED COPY  
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carina L. Dunlap - EXT. 2951

EXAMINER'S INITIALS: \_\_\_\_\_

EFFECTIVE DATE 12/8/08

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

Imperial Realty Management Group, 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:961687 Gateway Boulevard  
Suite 201-A  
Amelia Island, FL 32034Mailing Address:961687 Gateway Boulevard  
Suite 201-A  
Amelia Island, FL 32034

## ARTICLE III - Registered Agent, Registered Office, &amp; 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:

Darbin T. Skeans

Name

961687 Gateway Blvd., Ste. 201-AFlorida street address (P.O. Box NOT acceptable)Amelia Island FL 32034

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..*

BY: *Darbin T. Skeans*

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:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

Darbin T. Skeans

961687 Gateway Boulevard, Ste. 201-A

Amelia Island, FL 32034

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(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: December 8, 2008. (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.)

Darbin T. Skeans, Member

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)