

L08000115141

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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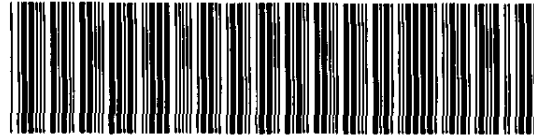
(Business Entity Name)

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2008 DEC 18 PM 1:46
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B. KOHR

DEC 18 2008

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 831624 9666A

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE : December 18, 2008

ORDER TIME : 11:12 AM

ORDER NO. : 831624-015

CUSTOMER NO: 9666A

FILED
08 DEC 18 PM 3:25
TALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: OCALA PLAZA APARTMENTS, 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: Kimberly Moret - EXT. 2949

EXAMINER'S INITIALS: _____

**ARTICLES OF ORGANIZATION
FOR
OCALA PLAZA APARTMENTS, LLC
A FLORIDA LIMITED LIABILITY COMPANY**

FILED
08 DEC 18 PM 3:25
TALLAHASSEE, FLORIDA

**ARTICLE I.
NAME**

The name of the Limited Liability Company is "OCALA PLAZA APARTMENTS, LLC" (the "Company").

**ARTICLE II.
ADDRESS**

The mailing address and street address of the principal office of the Company is 525 NE Sanchez Avenue, Ocala, FL 34470.

**ARTICLE III.
DURATION**

The period of duration for the Company shall be perpetual unless the Company is earlier dissolved in accordance with either the provisions of the *Florida Limited Liability Company Act*, Sections 608.401 through 608.514 of the *Florida Statutes Annotated* (the "Act") or the Company's Operating Agreement among the Members (the "Operating Agreement").

**ARTICLE IV.
MANAGEMENT**

The Limited Liability Company is to be managed by a Manager.

**ARTICLE V.
PURPOSE**

The purpose for which the Company is being organized is to acquire and develop, for the purposes of lease or resale, residential and/or commercial real property, and to transact any other lawful business approved by the Members of the Company and for which a limited liability company may be formed under the laws of the State of Florida.

**ARTICLE VI.
MEMBERS' RIGHTS TO CONTINUE BUSINESS**

The right of the remaining Members of the Company to continue the business on the death, retirement, resignation, expulsion, bankruptcy or dissolution of a Member or the occurrence of any other event which terminates the continued membership of a member in the Company shall be upon the consent of all of the remaining Members in accordance with the terms and conditions of

**ARTICLES OF ORGANIZATION
FOR
OCALA PLAZA APARTMENTS, LLC
A FLORIDA LIMITED LIABILITY COMPANY**

Page 2 of 2

the Operating Agreement to continue the business of the Company, provided that there is at least one (1) remaining Member.

**ARTICLE VII.
AMENDMENTS**

The Company reserves the right to amend, alter, change or repeal any provision contained in these Articles of Organization, in the manner now or hereafter prescribed by the Act.

IN WITNESS WHEREOF, the undersigned, being the only Member of the Company, has hereunto set his hand this 16th day of December, 2008.

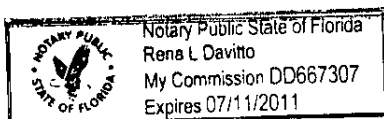


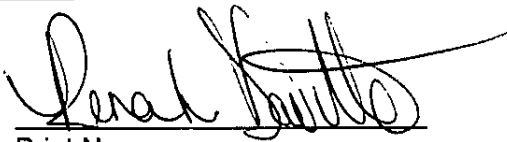
LAWRENCE D. BREECH

**STATE OF FLORIDA
COUNTY OF MARION**

The foregoing ARTICLES OF ORGANIZATION was acknowledged before me by LAWRENCE D. BREECH as a member of the above named limited liability company, who is personally known to me.

Dated: this 16th day of December, 2008.





Print Name: _____
Notary Public, State of Florida
Commission number _____
Commission expires _____

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

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/ REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: *Ocala Plaza Apartments, LLC.*
2. The name and address of the registered agent and office is:

Lawrence D. Breech
525 NE Sanchez Avenue
Ocala, FL 34471

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.

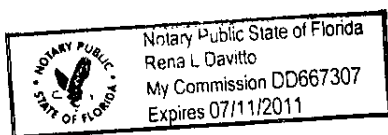


LAWRENCE D. BREECH

Date: 12/16/08

STATE OF FLORIDA
COUNTY OF MARION

The foregoing instrument was acknowledged before me this 16th day of December, 2008, by LAWRENCE D. BREECH who is ☒ personally known to me or who ☐ has produced _____ as identification.



Sign Rena L. Davitto

Print _____

Notary Public, State of Florida

Commission Expiration: _____

Commission No.: _____