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**EXAMINER** 

CORPDIRECT AGENTS, INC. (formerly CCRS) 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 222-1173 FILING COVER SHEET ACCT. #FCA-14 **CONTACT:** ASHLEY SMITH DATE: 12-22-2008 **REF. #:** 000166.97147 CORP. NAME: MAXTON LAND, L.L.C. ( ) ARTICLES OF DISSOLUTION ( ) ARTICLES OF AMENDMENT ( ) ARTICLES OF INCORPORATION ( ) TRADEMARK/SERVICE MARK ( ) FICTITIOUS NAME ( ) ANNUAL REPORT (XX) LIMITED LIABILITY ( ) FOREIGN QUALIFICATION ( ) LIMITED PARTNERSHIP ( ) WITHDRAWAL ( ) REINSTATEMENT ( ) MERGER ( ) CERTIFICATE OF CANCELLATION ( ) OTHER: STATE FEES PREPAID WITH CHECK# 528 703 FOR \$ 155.00 **AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:** COST LIMIT: \$ PLEASE RETURN: ( ) CERTIFICATE OF GOOD STANDING ( ) PLAIN STAMPED COPY (XX) CERTIFIED COPY ( ) CERTIFICATE OF STATUS

Examiner's Initials

#### ARTICLES OF ORGANIZATION

OF

### MAXTON LAND, L.L.C.

of MAXTON LAND,

y"), on behalf of the

The undersigned, as the authorized representative of the initial member of MAXTON LAND, L.L.C., a Florida limited liability company formed hereunder (the "Company"), on behalf of the members of the Company, hereby forms a limited liability company under the laws of the State of Florida.

## ARTICLE I COMPANY NAME

The name of the company is MAXTON LAND, L.L.C.

# ARTICLE II COMMENCEMENT AND TERM OF EXISTENCE

In accordance with Section 608.409(1) of the Florida Limited Liability Company Act (the "Act"), the term of existence of the Company shall commence upon the filing of these executed Articles of Organization with the Florida Department of State, and shall continue perpetually, unless otherwise dissolved pursuant to the Operating Agreement (or Limited Liability Company Agreement) of the Company.

# ARTICLE III MAILING ADDRESS AND STREET ADDRESS OF COMPANY

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

MAXTON LAND, L.L.C. 5801 Congress Avenue Boca Raton, Florida 33487

## ARTICLE IV REGISTERED AGENT ADDRESS

The registered agent and the street address of the registered agent of this Company in the State of Florida shall be:

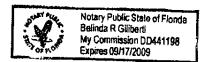
Geoffrey S. Mombach, Esq. Mombach, Boyle & Hardin, P.A. 500 East Broward Boulevard Suite 1950 Fort Lauderdale, Florida 33394

IN WITNESS WHEREOF, the undersigned being the authorized representative of the initial member of the limited liability company hereby executes these Articles of Organization, this 19th day of December, 2008.

GEOFTREY S, MOMBACI

STATE OF FLORIDA	)
COUNTY OF BROWARD	)

The foregoing instrument was acknowledged before me this 19 day of December, 2008, by GEOFFREY S. MOMBACH, who Is personally known to me or who I has produced a Florida driver's license as identification.



Notary Public - State of Florida

My Commission Expires: 09/17/09
Commission Number:

00441198

Having been named as registered agent and to accept service of process for the above 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.

DATED this 19th day of December, 2008.

eoffrey(S/. Mom)

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