

L 09000029548

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

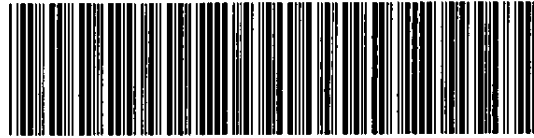
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

B. KOHR

MAR 26 2009

EXAMINER



CT

a Wolters Kluwer business

CT  
1203 Governors Square Blvd.  
Tallahassee, FL 32301-2960

850 222 1092 tel  
850 222 7615 fax  
www.ctlegalsolutions.com

160.00

March 26, 2009

Department of State, Florida  
Clifton Building  
2611 Executive Center Circle  
Tallahassee FL 32301

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09 MAR 26 PM 1:45  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

Please file 2nd

Re: Order #: 7519061 SO  
Customer Reference 1: 32543.0004  
Customer Reference 2: None Given

Dear Department of State, Florida:

Please obtain the following:

Woodbridge Executive Incentive Plan 1, LP (FL)  
Formation  
Florida

Bluegreen Program GP, LLC (FL)  
Formation  
Florida

Woodbridge Executive Incentive Plan 1, LP (FL)  
Certificate of Status-Domestic  
Florida

Bluegreen Program GP, LLC (FL)  
Certificate of Status-Domestic  
Florida

Woodbridge Executive Incentive Plan 1, LP (FL)  
Cert Copy of Certificate of LP  
Florida

Bluegreen Program GP, LLC (FL)  
Cert Copy of Articles of Org  
Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the



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1203 Governors Square Blvd.  
Tallahassee, FL 32301-2960

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850 222 7615 fax  
[www.ctlegalsolutions.com](http://www.ctlegalsolutions.com)

undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Christina McNeair  
CL Operations Specialist  
[Christina.McNeair@wolterskluwer.com](mailto:Christina.McNeair@wolterskluwer.com)

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09 MAR 26 PM 1:45  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION OF  
BLUEGREEN PROGRAM GP, LLC

The undersigned, for the purpose of forming a limited liability company (the "Company") under the Florida Limited Liability Company Act, Florida Statutes Chapter 608, as amended, hereby makes and acknowledges and files the following Articles of Organization.

ARTICLE I – NAME

The name of the Company is Bluegreen Program GP, LLC.

ARTICLE II – ADDRESS

The mailing address and street address of the principal office of the Company is 2100 West Cypress Creek Road, Fort Lauderdale, Florida 33309.

ARTICLE III – DURATION

The period of duration for the Company shall be perpetual.

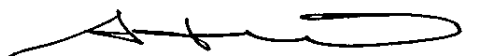
ARTICLE IV – MANAGEMENT

The business of the Company will be managed by the Members. The name and address of the sole initial managing Member is Woodbridge Fund I, LLC, a Florida limited liability company, 2100 West Cypress Creek Road, Fort Lauderdale, Florida 33309.

ARTICLE V – REGISTERED OFFICE AND AGENT AND ADDRESS

The name and the Florida street address of the registered agent of the Company are: CT Corporation System, 1200 South Pine Island Road, Plantation, Florida 33324.

IN WITNESS WHEREOF, the undersigned has made and subscribed these Articles of Organization for the foregoing uses and purposes this 13th day of March, 2009.



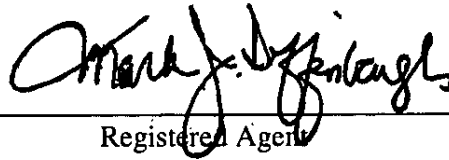
Name: Seth M. Wise  
Title: Authorized Representative

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MAR 26 PM 1:15  
CLERK OF DISTRICT COURT  
JACKSONVILLE, FLORIDA

### REGISTERED AGENT'S ACCEPTANCE

Having been named as registered agent and to accept service of process for Bluegreen Program GP, LLC at the place designated in this certificate, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and is familiar with and accepts the obligations of its position as registered agent as provided for in Chapter 608, Florida Statutes.

Dated: 3/25/09

  
\_\_\_\_\_  
Registered Agent

Mark J. Dittenbaugh  
Asst. Secretary & V. President