

L09000052763

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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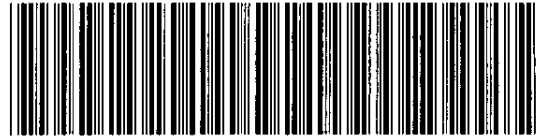
(Business Entity Name)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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09 JUN - 1 PM 12:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. KOHR

JUN - 1 2009

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 021439 9666A

AUTHORIZATION :

[Signature]

COST LIMIT : \$ 125.00

ORDER DATE : June 1, 2009

ORDER TIME : 9:51 AM

ORDER NO. : 021439-015

CUSTOMER NO: 9666A

FILED
09 JUN -1 PM 12:45
TALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: WRYP ILF, LLC

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Kimberly Moret - EXT. 2949

EXAMINER'S INITIALS: _____

**ARTICLES OF ORGANIZATION
FOR
WRYP ILF, LLC
A FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I.
NAME**

The name of the Limited Liability Company is "WRYP ILF, LLC" (the "Company").

**ARTICLE II.
ADDRESS**

The mailing address and street address of the principal office of the Company is 5455 SW 28th Avenue, Ocala, FL 34471.

**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 two (2) Managers.

**ARTICLE V.
PURPOSE**

The Company is organized to own, hold, develop and invest in real property, including for purposes of development and operation of an independent living facility, and to engage in such other lawful activities as are reasonably necessary or useful to the furtherance of the foregoing purpose, upon and subject to the terms and conditions of these Articles of Organization (the "*Business*"). Notwithstanding the foregoing, the Company shall not engage in any business, and shall have no purpose, unrelated to the Real Property described in Exhibit "A" and shall not acquire any real property or own assets other than those related to the Real Property described in Exhibit "A", and the development and operation of an independent living facility or similar facility thereon, and/or otherwise in furtherance of the purposes of the Company.

**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

**ARTICLES OF ORGANIZATION
FOR
WRYP ILF, LLC
A FLORIDA LIMITED LIABILITY COMPANY**

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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 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 and in accordance with any limitation set forth in the Operating Agreement.

IN WITNESS WHEREOF, the undersigned, being the authorized representative of WRYP, LLC, a Florida Limited Liability Company, the sole Member of the Company, has hereunto set his hand this 24 day of April, 2009.

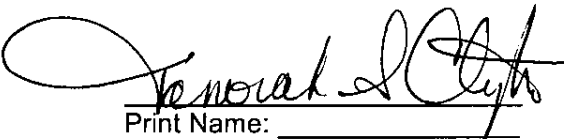


MARK A. YAP

STATE OF FLORIDA -
COUNTY OF Meander

The foregoing ARTICLES OF ORGANIZATION was acknowledged before me by MARK A. YAP, the authorized representative of WRYP, LLC, a Florida Limited Liability Company, the sole Member of the Company, who is personally known to me.

Dated: this 24 day of April, 2009.



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



TAMORAH S. CLAYTON
Commission DD 653629
Expires June 10, 2011
Bonded Thru Troy Fain Insurance 800-385-7019

**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: *WRYP ILF, LLC.*
2. The name and address of the registered agent and office is:

Mark A. Yap
5455 SW 28th Avenue
Ocala, FL 34474

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.



MARK A. YAP

Date: 4 7, 2009