

Division of Corporations

Page 1 of 1

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H090001531703))



H090001531703ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : HENDERSON, FRANKLIN, STARNES & HOLT, P.A.
Account Number : 075410002172
Phone : (239) 344-1100
Fax Number : (239) 344-1200

FLORIDA/FOREIGN LIMITED LIABILITY CO.

WilsonMiller KSA, LLC

| | |
|-----------------------|----------|
| Certificate of Status | 0 |
| Certified Copy | 1 |
| Page Count | 03 |
| Estimated Charge | \$155.00 |

S. HAWKES

JUN 30 2009

EXAMINER

RECEIVED

09 JUN 29 AM 10:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

FAX AUDIT NO.: H09000153170 3

**ARTICLES OF ORGANIZATION
OF
WilsonMiller KSA, LLC**

FILED
JUN 29 AM 10:53
TALLAHASSEE FLORIDA
SECRETARY OF STATE

ARTICLE I-NAME

The name of the limited liability company shall be WilsonMiller KSA, LLC (the "Company").

ARTICLE II-MAILING AND STREET ADDRESS

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

3200 Bailey Lane, Suite 200
Naples, Florida 34105

ARTICLE III-EFFECTIVE DATE

This limited liability company's existence shall commence upon the filing of these Articles and shall terminate as provided for in the Operating Agreement.

ARTICLE IV-INITIAL REGISTERED AGENT AND OFFICE

The name and street address of the initial registered agent of the Company is:

Name

Address

GUY E. WHITESMAN

1715 Monroe Street
Fort Myers, Florida 33901

ARTICLE V-PURPOSE

The Company shall have unlimited power to engage in and do any lawful act concerning any or all lawful businesses for which limited liability companies may be organized according to the laws of the State of Florida, including all powers and purposes now and hereafter permitted by law to a limited liability company.

ARTICLE VI-MANAGEMENT OF THE COMPANY

The Company shall be managed by not less than one (1) manager (the "Manager") and is, therefore, a manager-managed company. The following are the

FAX AUDIT NO.: H09000153170 3

FAX AUDIT NO.: H09000153170 3


names and addresses of the initial Managers who shall serve as the Managers of the Company until their successors are elected and qualified:

| <u>Name</u> | <u>Address</u> |
|-----------------|--|
| FERMIN A. DIAZ | 3200 Bailey Lane, Suite 200 Naples, Florida 34105 |
| KEITH W. MORROW | 3200 Bailey Lane, Suite 200 Naples, Florida 34105 |
| DAVID A. KEMPER | 3200 Bailey Lane, Suite 200 Naples, Florida 34105 |
| DAVID S. RIVERA | 3200 Bailey Lane, Suite 200 Naples, Florida 34105 |

ARTICLE VII-OPERATING AGREEMENT

The Members shall have the power to adopt, alter, amend, or repeal the Operating Agreement of the Company containing provisions for the regulation and management of the affairs of the Company.

The undersigned, being an authorized representative of the Members of the Company, has executed these Articles of Organization this 29th day of June, 2009.



GUY E. WHITESMAN
Authorized Representative

FAX AUDIT NO.: H09000153170 3

FILED
JUN 29 AM 10:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
09 JUN 29 AM 10:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FAX AUDIT NO.: H09000153170 3

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

PURSUANT TO THE PROVISIONS OF SECTION 608.415, 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: WilsonMiller KSA, LLC.
2. The name and address of the registered agent and office is:

Guy E. Whitesman
1715 Monroe Street
Fort Myers, Florida 33901

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.


GUY E. WHITESMAN
Registered Agent

FAX AUDIT NO.: H09000153170 3