

Division of Corporations

**L09000079947**

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.

(((H09000184945 3)))



H090001849453ABC7

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 : WHITE & CASE  
Account Number : 075410002143  
Phone : (305) 371-2700  
Fax Number : (305) 358-5744

FILED  
09 AUG 19 AM 8:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LIMITED LIABILITY CO.

WCI COMMUNITIES PARCEL 19, LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

RECEIVED

09 AUG 19 PM 12:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ATTN: mnbw

1548053-0019

Electronic Filing Menu

Corporate Filing Menu

Help

**FILED**  
09 AUG 19 AM 8:07  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLES OF ORGANIZATION  
OF  
WCI COMMUNITIES PARCEL 19, LLC**

Pursuant to section 608.407, Florida Statutes, the undersigned hereby files these Articles of Organization as follows:

**ARTICLE I - NAME**

The name of the Limited Liability Company is **WCI COMMUNITIES PARCEL 19, LLC**.

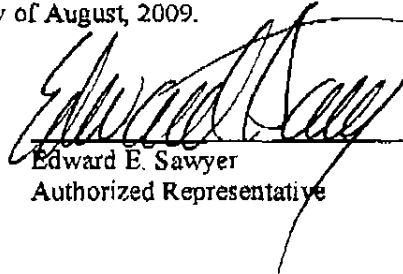
**ARTICLE II - ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is c/o White & Case, LLP, 200 S. Biscayne Boulevard, Suite 4900, Miami, FL 33131.

**ARTICLE III - DURATION**

The period of duration for the Limited Liability Company is perpetual.

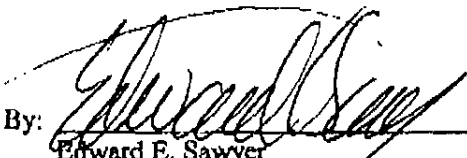
IN WITNESS WHEREOF, the undersigned authorized representative has hereunto set his hand and seal this 9 day of August, 2009.

  
\_\_\_\_\_  
Edward E. Sawyer  
Authorized Representative

**CERTIFICATE DESIGNATING REGISTERED AGENT  
AND REGISTERED OFFICE**

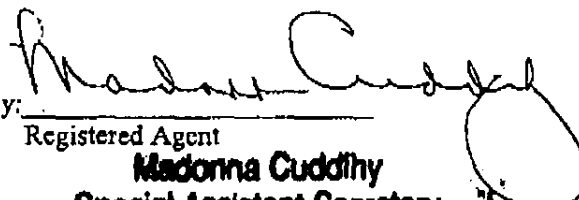
Pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned submits the following statement in designating the registered office/registered agent:

**WCI COMMUNITIES PARCEL 19, LLC**, desiring to organize as a limited liability company under the laws of the State of Florida, has designated 1200 South Pine Island Road, Plantation, FL 33324, as its initial Registered Office and has named C T Corporation System located at said address as its initial Registered Agent.

By:   
Edward E. Sawyer  
Authorized Representative

Having been named Registered Agent for the above stated limited liability company, at the designated Registered Office, the undersigned hereby accepts said appointment 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 the undersigned's duties, and the undersigned is familiar with and accepts the obligations of the undersigned's position as registered agent.

**C T CORPORATION SYSTEM**

By:   
Registered Agent  
**Madonna Cuddihy**  
Special Assistant Secretary

**FILED**  
09 AUG 19 AM 8:07  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA