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(Requestor's Name)	500160797955
(City/State/Zip/Phone #)	10/01/0901002010 **125.00
(Business Entity Name)	t i t storegers,
(Document Number) Certified Copies Certificates of Status	DIVISION OF CO
Special Instructions to Filing Officer:	AH ID: 56
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•. •.	COVER	R LETTER	<i>0</i> ,	N SICE
ΓΟ: Registration Section Division of Corpora			Če,	SC SU WI L' NO POLEN
SUBJECT: <u>HCI Marin</u>	a, LLC			74 19.
	Name of Limited	Liability Company		5
The enclosed Articles of Orga	nization and fee(s) are su	bmitted for filing.		
Please return all corresponden	ce concerning this matte	r to the following:		
Sharon Stile	e <mark>s, Legal Assis</mark> t.	ant		
	3	Name of Person		
Lewis, Rice				
		Firm/Company		
1010 Walnut,	, Suite 500			
		Address		
Kansas City,	, Missouri 64106			
	City/	State and Zip Code	· · · · · · · · · · · · · · · · · · ·	
skstiles@lrf	-kc.com	future annual report notification)		
		•		
For further information concer	ning mis matter, please o	-a11.		
Sharon Stiles		at ( <u>816</u> ) <u>421-2500</u>		
Name of Pers	on	Area Code & Daytime Telephon	e Number	
Enclosed is a check for the	following amount:			•
	30.00 Filing Fee & [ ertificate of Status	Certified Copy (additional copy is enclosed) Ce	50.00 Filing Fee, ertificate of Status & ertified Copy ditional copy is enclosed)	
Reg Div P.C	iling Address gistration Section vision of Corporations b. Box 6327 Jahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Cycle Tallahassee, FL 32301		
`			•	

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COM

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

## HCI Marina, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

## **ARTICLE II - Address:**

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

Principal Office Address:	Mailing Address:
1010 Walnut, Suite 500	1010 Walnut, Suite 500
Kansas City, Missouri 64106	Kansas City, Missouri 64106

#### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

С Т Согро	pration System
Na	ime
1200 South P	Pine Island Road
Florida street address (I	P.O. Box <u>NOT</u> acceptabl
Plantation	FL <sup>33324</sup>
City, Stat	e, and Zip

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 as provided for in Chapter 608, F.S.

C T Corporation System

See attached

By.

Registered Agent's Signature (REQUIRED)

## (CONTINUED)

# **ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager Name and Address:

"MGR" = Manager "MGRM" = Managing Member

MGRPaul Fingersh2020 West 89th St., Suite 320Leawood, Kansas 66206MGRJack Fingersh1010 Walnut, Suite 500Kansas City, Missouri 64106

Irwin Blitt

<u>11111 West 95th St., Suite 204</u> Overland Park, Kansas 66214

(Use attachment if necessary)

MGR

ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_\_\_. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:** HCI Investors LLC, Mem<u>ber</u> By: Signature of/a/member or an authorized representative of a member.

(In accordance with section 608.408(3)/ Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Jack Fingersh, Manager

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Page 2 of 2

# Re: HCI MARINA, LLC

Having been named as registered agent and to accept service of process for HCI MARINA, LLC at the place herein designated:

CT Corporation System 1200 South Pine Island Road Plantation, Florida 33324

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 for in Chapter 608, F.S.

Dated: September 22, 2009

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**CT** Corporation System By: ssica L. Gardner, Vice President