

Division of Corporations

Page 1 of 1

**Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet**

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To:

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

From: GAIL S ANDRE

Account Name : LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.  
Account Number : 072720000036  
Phone : (407) 843-4600  
Fax Number : (407) 843-4444

**PLEASE ARRANGE FILING OF THE ATTACHED ARTICLES OF ORGANIZATION AND RETURN A CERTIFICATION TO ME AS SOON AS POSSIBLE. THANK YOU.**

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FLORIDA/FOREIGN LIMITED LIABILITY CO.  
KARA PLACE, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

**RECEIVED**

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Corporate Filing Menu

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**EXAMINER**

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**ARTICLES OF ORGANIZATION  
OF  
KARA PLACE, LLC**

**ARTICLE I - NAME**

The name of this limited liability company is KARA PLACE, LLC (the "Company").

**ARTICLE II - PRINCIPAL OFFICE**

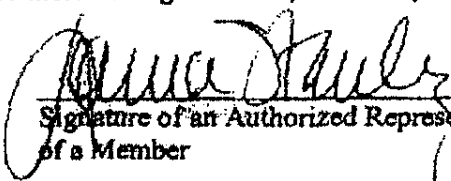
The mailing address and the street address of the principal office of the Company is 1588 Cottonwood Creek Place, Lake Mary, Florida 32746.

**ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT**

The street address of the initial registered office of the Company is 215 North Eola Drive, Orlando, Florida 32801 and the name of the initial registered agent of the Company at that address is Norma Stanley.

**ARTICLE IV - MANAGEMENT**

The Company is to be managed by one or more managers and is, therefore, a manager-managed company.

  
Signature of an Authorized Representative  
of a Member

Norma Stanley  
Typed or Printed Name of Signer

**ACCEPTANCE OF REGISTERED AGENT**

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated above, the undersigned hereby accepts the appointment as registered agent and agrees to act in such capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of her duties, and represents that she is familiar with, and accepts the obligations of, her position as registered agent as provided for in Chapter 608, Florida Statutes.

  
Norma Stanley

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