09 000	122264
(Requestor's Name) (Address) (Address)	500163706245
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	12/24/0901009020 **125.00 TALLAHASSEE FLORING
Special Instructions to Filing Officer:	T. CLINE DEC 2 8 2009 EXAMINER

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	ation Section of Corporations			
SUBJECT:	FC	Property Investors	s, LLC.	
	Name of	Limited Liability Company	1	
The enclosed Art	icles of Organization and fee(s	s) are submitted for filing.		
Please return all	correspondence concerning this	s matter to the following:		
		James F. Perry		·
		Name of Person		
	Jarr	nes F. Perry & Comp	any	
		Firm/Company		F0 8
	7300 N KENDALL DRIVE, SUITE 519			
		Address		C 2
		Miami, Florida 33156	;	
		City/State and Zip Code		FLOR
	JTPT E-mail address: (to be	nortgage@bellsouth	.net notification)	
For further inform	nation concerning this matter,	please call:		
	James F. Perry	at ( 305 )	670-800	าร
	Name of Person		Daytime Telephone Nu	
Enclosed is a ch	eck for the following amou	nt:		
_	Fee \$\$130.00 Filing Fee Certificate of Statu	e & 🗍 \$155.00 Filing F	Certif enclosed) Certif	00 Filing Fee, icate of Status & ied Copy onal copy is enclosed)
۰ ,۰	<u>Mailing Address</u> Registration Section Division of Corporat P.O. Box 6327 Tallahassee, FL 3231	Clifton Build	Section Corporations ding tive Center Circle	

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

The name of the Limited Liability Company is:

# FC Property Investors, 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:
7300 N KENDALL DRIVE, SUITE 519	7300 N KENDALL DRIVE, SUITE 519
Miami, Florida 33156	Miami, Florida 33156
	S12
(The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.)	
The name and the Florida street address of the	e registered agent are:
James	F. Perry
Nam	ne la
James F. Pen	ry & Company Shine as a bire

Florida street address (P.O. Box NOT acceptable)

Miami, Florida 33156 <sub>FL</sub>

City, State, 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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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

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

**Title:** 

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.....

## Name and Address:

"MGR" = Manager "MGRM" = Managing Member

MGRM

JAMET F. Peany & Company

	<u> </u>	
(Use attachment if necessary)		
ARTICLE V: Effective date, if other than the date of filing: _	1/1/2010	(OPTIONAL)
(If an effective date is listed, the date must be specific and o to or 90 days after the date of filing.)	cannot be more than fiv	ve business days prior

**REQUIRED SIGNATURE:** 

In

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.)

JAMES F. PERRY Typed or printed name of signee

**Filing Fees:** 

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

\$ 5.00 Certificate of Status (Optional)