

L10000008060

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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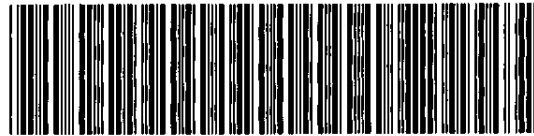
(Business Entity Name)

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RECEIVED
10 JAN 22 PM 4:38
DEPARTMENT OF THE
SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
10 JAN 22 AM 8:35
SECRETARY OF STATE
DIVISION OF CORPORATIONS

E. KOHR

JAN 25 2010

EXAMINER

CORPDIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET

ACCT. #FCA-14

CONTACT: TRICIA TADLOCK

DATE: 01/22/10

REF. #: 0447.118087

CORP. NAME: ZOLFO SPRINGS GROVES, LLC

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DIVISION OF CORPORATIONS
10 JAN 22 AM 8:35

- | | | |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

STATE FEES PREPAID WITH CHECK# 533400 **FOR \$** 155.00.

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ **COST LIMIT: \$** _____

PLEASE RETURN:

- | | | |
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| <input checked="" type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

ARTICLES OF ORGANIZATION
OF
ZOLFO SPRINGS GROVES, LLC

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DIVISION OF CORPORATIONS
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The undersigned authorized representative does hereby certify that the persons so identified herein have associated themselves together for the purpose of forming a limited liability company (the "Company") under the laws of the State of Florida.

ARTICLE I
NAME

The name of the Company shall be: **Zolfo Springs Groves, LLC**

ARTICLE II
ADDRESS AND PLACE OF BUSINESS

The Company's mailing address is 8127 Siquita Dr., NE, St. Petersburg, Florida 33702 and the Company's principal address is 8127 Siquita Dr., NE, St. Petersburg, Florida 33702.

ARTICLE III
PERIOD OF DURATION

The period of duration of the Company shall be perpetual.

ARTICLE IV
GENERAL POWERS

The Company is formed for the purpose of conducting and undertaking, and shall have the power to conduct and undertake, any and all activities and actions authorized under the Florida Limited Liability Company Act, Chapter 608, Florida Statutes.

ARTICLE V
MANAGEMENT

The management of the Company shall be determined in accordance with the operating agreement of the Company (the "Operating Agreement").

**ARTICLES OF ORGANIZATION
OF ZOLFO SPRINGS GROVES, LLC
PAGE 2**

**ARTICLE VI
RIGHT TO CONTINUE BUSINESS**

Upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Company, the business of the Company shall not cease and the Company shall not be dissolved except as provided in the Operating Agreement of the Company.

**ARTICLE VII
RESTRICTIONS ON MEMBERSHIP**

New members shall be admitted to the Company in accordance with the Operating Agreement of the Company. Contributions required of a new member shall be determined in accordance with the Operating Agreement of the Company. A member's interest in the Company may not be sold or otherwise transferred except as provided in accordance with the Company's Operating Agreement. Additional restrictions and conditions on membership may be set forth in the Operating Agreement or other agreement adopted by the members.

**ARTICLE VIII
OPERATING AGREEMENT**

The members of the Company may adopt an Operating Agreement pertaining to the regulation, management, and other affairs of the Company.

**ARTICLE IX
REGISTERED OFFICE AND REGISTERED AGENT**

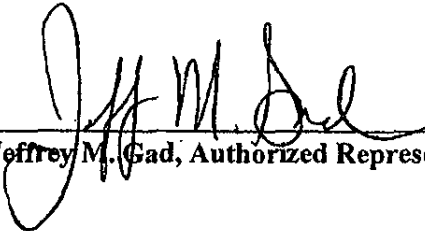
The street address of the Company's initial registered office in Florida is 515 East Park Avenue, Tallahassee, Florida 32301 and the name of the initial registered agent is CorpDirect Agents, Inc. The Company may change its registered office or its registered agent or both by filing with the Department of State of the State of Florida a statement complying with Section 608.416, Florida Statutes.

**ARTICLE X
ACKNOWLEDGMENT**

The members of the Company, through their undersigned authorized representative, do hereby certify that the foregoing constitutes the proposed Articles of Organization of **Zolfo Springs Groves, LLC**. These Articles of Organization may be amended from time to time by consent of the members in the manner now or hereafter prescribed in the Company's Operating Agreement, consistent with the laws of the State of Florida.

ARTICLES OF ORGANIZATION
OF ZOLFO SPRINGS GROVES, LLC
PAGE 3

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization
this 22nd day of January, 2010.



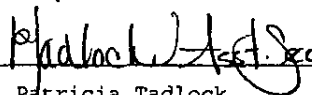
Jeffrey M. Gad, Authorized Representative

ACCEPTANCE BY REGISTERED AGENT

Having been appointed the registered agent of Zolfo Springs Groves, LLC, the
undersigned accepts such an appointment, agrees to act in such capacity and accepts the obligations
proposed by Section 608.415, Florida Statutes.

EXECUTED this 22nd day of January, 2010.

CORPDIRECT AGENTS, INC.

By: 
Name: Patricia Tadlock
Its: Assistant Secretary