

L10W0026174

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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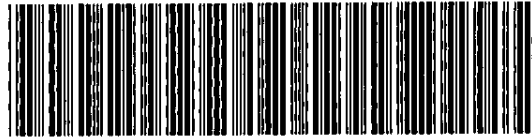
(Business Entity Name)

(Document Number)

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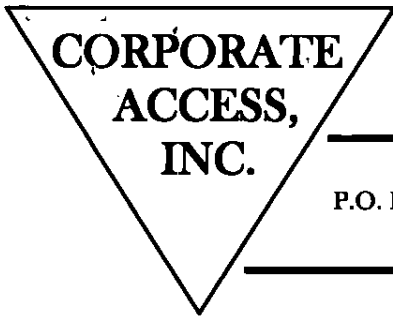
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EXAMINER



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1. Palm Coast Investors of Ft. Myers, LLC
(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

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ARTICLE I - Name:

The name of the limited liability company is: PALM COAST INVESTORS OF FT. MYERS, LLC.

ARTICLE II - Address:

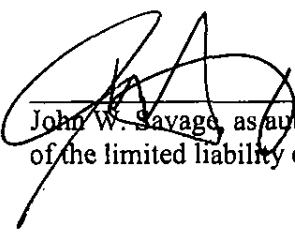
The mailing address and street address of the principal office of the limited liability company is:

333 3rd Avenue North
Suite 400
St. Petersburg, Florida 33701

ARTICLE III - Registered Agent/Registered Office

The mailing address and street address of the limited liability company's initial registered agent in Florida is:

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



John W. Savage, as authorized representative
of the limited liability company.

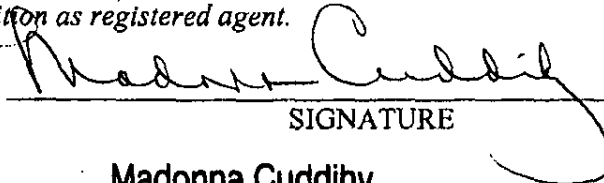
**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 608.415, Florida statutes, the undersigned limited liability company submits the following statement to designate a registered office and registered agent in the state of Florida.

1. The name of the limited liability company is PALM COAST INVESTORS OF FT. MYERS, LLC.
2. The name and the Florida street address of the registered agent are:

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

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.



SIGNATURE

**Madonna Cuddihy
Special Assistant Secretary**