

L10000028919

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

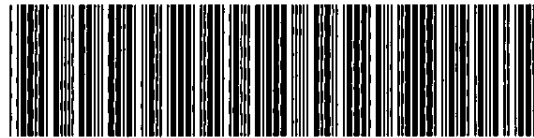
(Business Entity Name)

(Document Number)

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B. KOHR

MAR 16 2010

EXAMINER

Sonotek Research  
Requester's Name

Address

City/State/Zip

Phone #

656-5454

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**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. Knob Hill Group - WP LLC  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in ☐ Pick up time \_\_\_\_\_ ☒ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☒ Certificate of Status

**NEW FILINGS**

☐ Profit  
☐ Not for Profit  
☒ Limited Liability  
☐ Domestication  
☐ Other

**OTHER FILINGS**

☐ Annual Report  
☐ Fictitious Name

**AMENDMENTS**

☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**REGISTRATION/QUALIFICATION**

☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

Examiner's Initials

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

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**ARTICLE I - Name**

The name of the Limited Liability Company is:

**KNOB HILL GROUP-WP, LLC**

**ARTICLE II - Address**

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

1030 North Orange Avenue  
Suite 200  
Orlando, Florida 32801

**ARTICLE III - Registered Agent and Office and  
Registered Agent's Signature**

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

**CORPORATION COMPANY OF ORLANDO**  
300 South Orange Avenue  
Suite 1000 (MJG)  
Orlando, Florida 32801-5403


*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, Florida Statutes.*

**CORPORATION COMPANY OF ORLANDO**

By: 

(Registered Agent's Signature)

**Michael J. Grindstaff, Vice President**

  
Signature of a member or an

authorized representative of a member.

**Michael J. Grindstaff, Authorized Representative**

(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.)