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STATE  
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TALLAHASSEE, FLORIDA

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

10 MAY 18 PM 1:55

B. KOHR

MAY 18 2010

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 386405 7222145

AUTHORIZATION :

*Lyndee*

COST LIMIT : \$ 125.00

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DIVISION OF CORPORATIONS  
10 MAY 18 PM 1:55

ORDER DATE : May 17, 2010

ORDER TIME : 8:13 AM

ORDER NO. : 386405-010

CUSTOMER NO: 7222145

DOMESTIC FILING

NAME: VILANO SPRINGS DEVELOPMENT,  
LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION  
CERTIFICATE OF LIMITED PARTNERSHIP  
XXX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY  
XXX PLAIN STAMPED COPY  
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Matthew Young - EXT. 2962

EXAMINER'S INITIALS: \_\_\_\_\_

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I – Name:

The name of the Limited Liability Company is: Vilano Springs Development, LLC

### ARTICLE II – Address:

The mailing address and street address of the principal office of the Limited Liability Company

#### Principal Office Address:

60 State Street, Suite 700  
Boston, MA 02109

#### Mailing Address:

60 State Street, Suite 700  
Boston, MA 02109

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### ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:

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

Corporation Service Company

Name


1201 Hays Street

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

Tallahassee, FL 32301

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, Florida Statutes.*

x   
\_\_\_\_\_  
Registered Agent's Signature

**Matthew Young**  
**Asst. V. Pres.**

(CONTINUED)

**ARTICLE IV – Manager(s) or Managing Member(s):**

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

**Title:**

“MGR” = Manager

“MGRM” = Managing Member

**Name and Address:**

MGR

Rolando Rabines  
60 State Street, Suite 700  
Boston, MA 02109

**REQUIRED SIGNATURE:**

x 

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.)

Growing Well Partners LLC, Member; By: Rolando Rabines, Its Manager

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)