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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Certified Copies Certificates of Status
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Special Instructions to Filing Officer:
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Office Use Only



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NOV 1 8 2010 EXAMINER



ACCOUNT NO. : 12000000195

REFERENCE: 581650 7448543

AUTHORIZATION

COST LIMÍXÍ : \$ 125.00

ORDER DATE: November 18, 2010

ORDER TIME: 11:47 AM

ORDER NO. : 581650-015

CUSTOMER NO: 7448543

DOMESTIC FILING

NAME: 5 GARDEN III, LLC

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Kimberly Moret - EXT. 2949

EXAMINER'S INITIALS:

•	
	ON THE STATE OF TH
ARTICLES OF ORGANIZATION FOR	R FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name:	in the second
The name of the Limited Liability Compar	ny is:
5 Garden III, LLC	
	"Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	
	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
8441 Cooper Creek Blvd	
University Park, FL 34201	White Strategy Park, FL 34201
Onversity Fack, 10.2-7201	Convoluity 1 and, 1 2 3 1201
	stered Office, & Registered Agent's Signature: n Registered Agent. You must designate an individual or another f the registered agent are:
	the regimered agent are.
David H. Baldauf	Name
	ranc
8441 Cooper Creek Blvd	eet address (P.O. Box <u>NOT</u> acceptable)
University Park.	
*	FL 34201

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:

"NAC V" = Manager	Name and Address:
"MGR" = Manager "MGRM" - Managing Membe	PT
	,
MGR	David H. Baldauf
	8441 Cooper Creek Blvd
	University Park, Florida 34201
	
	Affirm the transfer of the second sec
(III.a uttoohmant if naasaami)	
(Use attachment if necessary)	
LEV: Effective date, if other th	nan the date of filing: (OPTION.
fective date is listed, the date r	nust be specific and cannot be more than five business da
days after the date of filing.)	
REOUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
x x \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	member or an authorized representative of a member.

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)

David H. Baldauf, Manager

that the facts stated herein are true.)

Typed or printed name of signee