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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

10 DEC 10 PM 3:00

FILED  
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DIVISION OF CORPORATIONS

B. KOHR

DEC 10 2010

EXAMINER

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

FILING COVER SHEET  
ACCT. #FCA-14

CONTACT: KATIE WONSCH

DATE: 12/10/2010

REF. #: 000176.138137

CORP. NAME: LOST CREEK GP, LLC

**FILE SECOND!**  
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- |  |   |   |
|--|---|---|
| <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# 537712 FOR \$ 160.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

\_\_\_\_\_ COST LIMIT: \$ \_\_\_\_\_

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| <input type="checkbox"/> CERTIFICATE OF STATUS     |  |   |

Examiner's Initials

**ARTICLES OF ORGANIZATION  
OF  
LOST CREEK GP, LLC  
(a Florida limited liability company)**

Pursuant to Florida Statutes §608.407, the undersigned hereby submits the following Articles of Organization of **LOST CREEK GP, LLC** for the purpose of forming a limited liability company under the laws of the State of Florida.

**ARTICLE I.**

**Name**

The name of the Limited Liability Company is "**LOST CREEK GP, LLC**" (the "**Company**").

**ARTICLE II.**

**Principal Office**

The mailing address and street address of the principal office of the Company is: 401 East Las Olas Blvd, Suite 2200, Fort Lauderdale, FL 33301.

**ARTICLE III.**

**Registered Agent**

The name of the initial registered agent of the Company is **Robert J. Puck**, and the street address of the Company's initial registered agent is 401 East Las Olas Blvd, Suite 2200, Fort Lauderdale, FL 33301.

These Articles of Organization are hereby executed by the undersigned Authorized Representative of the Company.

  
\_\_\_\_\_  
Robert J. Puck  
Authorized Representative

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 DEC 10 PM 3:00

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DIVISION OF CORPORATIONS  
10 DEC 10 PM 3:00

**Acceptance of Appointment of Registered Agent**

**Robert J. Puck**, having been named the Registered Agent of **LOST CREEK GP, LLC**, hereby accepts such designation and is familiar with, and accepts, the obligations of such position, as provided in Chapter 608 of Florida Statutes.

  
\_\_\_\_\_  
**Robert J. Puck**

Date: December 10, 2010