

L100000131639

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

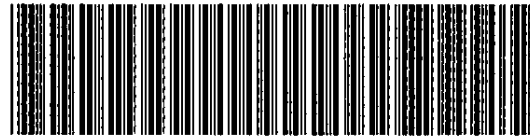
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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 1314-1316 Tech Blvd., LLC  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

R. Duane Johnson, Vice President

Name of Person

Northern Trust, NA

Firm/Company

425 N. Florida Avenue

Address

Tampa, FL 33602

City/State and Zip Code

rdj2@ntrs.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

R. Duane Johnson

Name of Person

at ( 813 ) 277-3117

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

\$125.00 Filing Fee

\$130.00 Filing Fee &  
Certificate of Status

☒ \$155.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$160.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**Mailing Address**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street/Courier Address**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**ARTICLES OF ORGANIZATION**

**FOR**

**1314-1316 TECH BLVD., LLC**

**ARTICLE I – Name:**

The name of the Limited Liability Company is:

1314-1316 Tech Blvd., LLC

**ARTICLE II – Address:**

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

**Principal Office Address:**

c/o R. Duane Johnson  
Northern Trust, NA  
425 N. Florida Avenue  
Tampa, FL 33602

**Mailing Address:**

c/o R. Duane Johnson  
Northern Trust, NA  
425 N. Florida Avenue  
Tampa, FL 33602

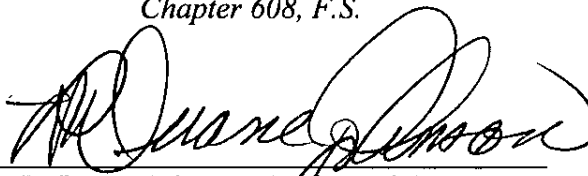
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TALLAHASSEE, FLORIDA

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

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

R. Duane Johnson  
Northern Trust, NA  
425 N. Florida Avenue  
Tampa, FL 33602

*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.*

  
R. Duane Johnson, Registered Agent

#### ARTICLE IV – Managing Members

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

**Title:**

**Name and Address:**

“MGRM” = Managing Member

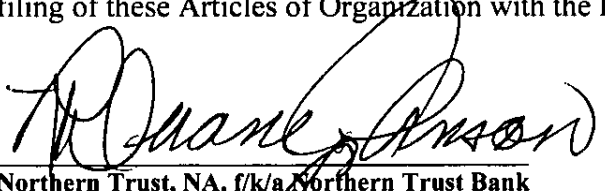
MGRM

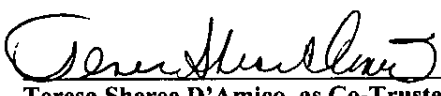
Northern Trust, NA, formerly known as  
Northern Trust Bank of Florida, N.A., as  
Co-Trustee of the Charles D. Edwards 1996  
Irrevocable Trust

MGRM

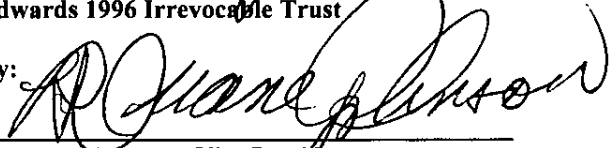
Teresa Sheree D’Amico, as Co-Trustee of  
the Charles D. Edwards 1996 Irrevocable  
Trust

**ARTICLE V:** The limited liability company shall commence its existence five days prior to the filing of these Articles of Organization with the Florida Secretary of State.

  
\_\_\_\_\_  
Northern Trust, NA, f/k/a Northern Trust Bank  
of Florida, as Co-Trustee of the Charles D.  
Edwards 1996 Irrevocable Trust

  
\_\_\_\_\_  
Teresa Sheree D’Amico, as Co-Trustee of the  
Charles D. Edwards 1996 Irrevocable Trust

By:

  
\_\_\_\_\_  
R. Duane Johnson, Vice President

(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.)