

L 110 00009 954

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

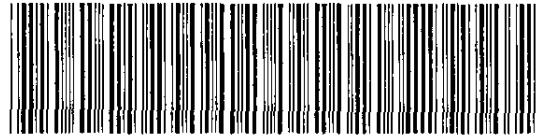
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B. KOHR
JAN 25 2011
EXAMINER



500189632025

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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11 JAN 24 PM 4: 12

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

11 JAN 24 AM 9: 23

B. KOHR
JAN 25 2011
EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195
REFERENCE : 652325 7448543
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 125.00

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
11 JAN 26 AM 9:23

ORDER DATE : January 24, 2011
ORDER TIME : 2:19 PM
ORDER NO. : 652325-005
CUSTOMER NO: 7448543

DOMESTIC FILING

NAME: 5221 OCEAN BLVD, LLC

EFFECTIVE DATE:

- ARTICLES OF INCORPORATION
- CERTIFICATE OF LIMITED PARTNERSHIP
- ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT. 2956

EXAMINER'S INITIALS: _____

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

5221 Ocean Blvd, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.")

ARTICLE II - Address:

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

Principal Office Address:

8441 Cooper Creek Blvd
University Park, FL 34201

Mailing Address:

8441 Cooper Creek Blvd
University Park, FL 34201

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DIVISION OF CORPORATIONS
11 JAN 24 AM 9:23

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Alicia H. Gayton

Name

8441 Cooper Creek Blvd

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

University Park, FL 34201

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, F.S..

By: 

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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

David H. Baldauf

8441 Cooper Creek Blvd

University Park, Florida 34201

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

 _____
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.)

Alicia H. Gayton, Authorized Representative and Registered Agent

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)