

L11000056251

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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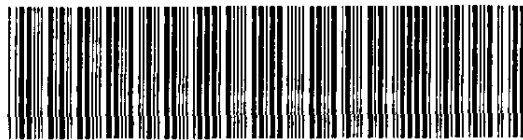
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. BRYAN

MAY 12 2011

EXAMINER

EXPERIENCE  
SINGERMAN MILLS  
DESBERG & KAUNTZ <sup>CO</sup> <sub>LPA</sub>  
BUSINESS, REAL ESTATE AND LITIGATION COUNSEL

*jsayoc@smdklaw.com*

May 10, 2011

VIA FEDERAL EXPRESS

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

Re: UPPLP, LLC

Dear Sir/Madam:

Enclosed for filing in respect of UPPLP, LLC please find the Articles of Organization for Florida Limited Liability Company. Also enclosed is our check in the amount of \$125.00 to cover the requisite filing fee. Please return evidence of filing to the undersigned. Should you have any questions, please do not hesitate to contact the undersigned by calling COLLECT. Thank you very much for your assistance in this matter.

Very truly yours,

  
Jeffrey A. Sayoc

JAS:njz  
Enclosures

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TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

UPPLP, LLC

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

**ARTICLE II - Address:**

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

**Principal Office Address:**

5207 Bayshore Boulevard, #20  
Tampa, Florida 33611

**Mailing Address:**

5207 Bayshore Boulevard, #20  
Tampa, Florida 33611

**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:

Paul F. Carrazzone

Name

5207 Bayshore Boulevard, #20

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

Tampa

FL 33611

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..*

  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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**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:**

Manager

University Park Properties Limited Partnership  
31515 Roberta Drive  
Bay Village, Ohio 44140

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

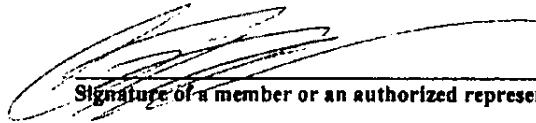
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(Use attachment if necessary)

**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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

**Paul F. Carrazzone**

\_\_\_\_\_  
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)

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