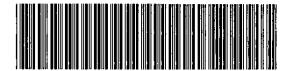
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(Requestor's Name)	
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PICK-UP WAIT	MAIL
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Certified Copies Certificates of St	atus
Special Instructions to Filing Officer:	
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Office Use Only



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C. LEWIS

Jun & 2011

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 26, 2011

LESLEY A. METZLER AVENTINE HILL, LLC 2533 LEXINGTON OAK DRIVE BRANDON, FL 33511

SUBJECT: IDEAL PROPERTY INVESTMENTS LLC

Ref. Number: W11000023255

We have received your document for IDEAL PROPERTY INVESTMENTS LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6047.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 711A00010040

Division of Corporations - P.O. BOX 6327 - Tallahassee Florida 32314

COVER LETTER

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TO:

Registration Section
Division of Corporations

SUBJECT: IDEAL PROPERTY INVESMENTS LLC
Name of Limited Liability Company
The enclosed Articles of Organization and fec(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
LESLEY A. METZLER Name of Person
AVENTINE HILL, LLC
Firm/Company
2533 LEXINGTON OAK DRIVE
Address
BRANDON FL 33511
City/State and Zip Code
BMETZLER@AVEHILL.COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
LESLEY A. METZLER at (321) 262-8789
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{S155.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \ \text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{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 Tallahassee, FL 32314 Street/Courier Address Registration Section Division of Corporations Clifton Building Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

IDEAL	REAL ESTATE IN	ubstments llc
	(Must end with the words "Limited	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II -		the principal office of the Limited Liability Company is:
Principal Office	ce Address:	Mailing Address:
23 W. CENTRA DULUTH MN 5	NL ENTRANCE 352 5811	23 W. CENTRAL ENTRANCE 352 DULUTH M N 55811
(The Limited Liabilibusiness entity with		terred Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:
	LESLEY A. METZI	LER Ag 2
)	Name
	2533 LEXING	TON OAK DRIVE
	Florida stre	ect address (P.O. Box NOT acceptable)
	BRANDON	m 33511
	Ci	ity, State, and Zip
liability con registered agei statutes relat	npany at the place designate nt and agree to act in this ca ing to the proper and comple	nd to accept service of process for the above stated limited d in this certificate, I hereby accept the appointment as pacity. I further agree to comply with the provisions of all ete performance of my duties, and I am familiar with and registered agent as provided for in Chapter 608, F.S.

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

itle: MGR" = Manager MGRM" = Managing Member GRM IMRAN ZIA 23 W. CENTRAL ENTRANCE DULUTH MN 55811 Use attachment if necessary) E V: Effective date, if other than the date of filing: ctive date is listed, the date must be specific and cannot be more anys after the date of filing.) EQUIRED SIGNATURE: (In accordance with section 608.408(3), Florida Statutes, the execution on the state of a member or as authorized representative constitutes an affirmation under the penalties of perjury that the fact I am aware that any false information submitted in a document to the constitutes a third degree felony as provided for in s.817.155, F.S.) IMRAN ZIA	ows: FILE
Jse attachment if necessary) E V: Effective date, if other than the date of filing: ctive date is listed, the date must be specific and cannot be more ays after the date of filing.) EQUIRED SIGNATURE: (In accordance with section 608.408(3), Florida Statutes, the execute constitutes an affirmation under the penalties of perjury that the fact I am aware that any false information submitted in a document to the constitutes a third degree felony as provided for in s.817.155, F.S.)	2011 JUN - 7 AM SEGRETARY OF S MALE AHASSEE FE
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EOUIRED SIGNATURE: Signature of a member or an authorized representative constitutes an affirmation under the penalties of perjury that the fact I am aware that any false information submitted in a document to the constitutes a third degree felony as provided for in s.817.155, F.S.)	. (OPTIONAL)
Signature of a member or an authorized representative (In accordance with section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury that the fact I am aware that any false information submitted in a document to the constitutes a third degree felony as provided for in s.817.155, F.S.)	ı five business days prior
(In accordance with section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury that the fact I am aware that any false information submitted in a document to the constitutes a third degree felony as provided for in s.817.155, F.S.)	
IMRAN ZIA	f this document ted herein are true.
	barment of state
Typed or printed name of signee	pu unem or susc

\$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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