Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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CYCLE STATE

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Division of Corporations

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From:

GAIL S ANDRE

Account Name : LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.

Account Number : 072720000036 Phone : (407)843-4600

PAX Number : (407)843-4444
PLEASE ARRANGE FILING OF THE ATTACHED ARTICLES OF ORGANIZATION AND RETURN A CERTIFICATION
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FLORIDA LIMITED LIABILITY CO.

SHAKAI LLC

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Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION **OF** SHAKAI LLC

R1200004304

ARTICLE I - NAME

The name of this limited liability company is SHAKAI LLC (the "Company

ARTICLE II - PRINCIPAL OFFICE

The mailing address and street address of the principal office of the Company is 1000 North Magnolia Avenue, Suite A, Orlando, Florida 32803.

ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Company is 215 North Eola Drive, Orlando, Florida 32801 and the name of the initial registered agent of the Company at that address is Aaron J. Gorovitz.

ARTICLE IV – MANAGEMENT

The Company is a manager-managed limited liability company and the initial manager of the Company is GFM Orange LLC, a Florida limited liability company

> Signature of a Member or an Authorized Representative of a Member

Aaron J. Gorovitz

Typed or Printed Name of Signer

ACCEPTANCE OF REGISTERED AGENT

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 l am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

Aaron J. Gorovitz