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Special Instructions to	Filing Officer:	

Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED AND FILED

D. BRUCE

OCT 8 2012

EXAMINER

12-48087

COVER LETTER

TO:	Registration Division of	n Section Corporations		
SUBJE	_{CT:} PRO	PERTIES CONN	ECT LLC	
		Name of Limi	ited Liability Company	
The enc	losed Article	s of Organization and fee(s) are	submitted for filing.	
Please r	eturn all corn	espondence concerning this ma	tter to the following:	
	IMRAN	ZIA		
-			Name of Person	
_			Firm/Company	
	1420 CI	FI ERRATION BOIL	JLEVARD SUITE 200	
-	1420 0	LLLDIVIIION BOC	Address	
_	.=. ===	ATION EL 04747 E	400	
Č	ELEBR	ATION, FL 34747-5	ity/State and Zip Code	
7	ZIAFRUIT	FUL@HOTMAIL.COM		ALI. SEC
			for future annual report notification)	
For furt	her information	on concerning this matter, pleas	se call:	\$358 444
IMDA	N ZIA		407 442 2400	
11011-7-4	···	ne of Person	at (407) 442-3188 Area Code & Daytime Telephone Number	95
	716		The course of th	- ŞA :
Enclose	ed is a check	for the following amount:		,
√ \$125.00	Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & S160.00 Filing Fee. Certified Copy (additional copy is enclosed) 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	



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 18, 2012

IMRAN ZIA 1420 CELEBRATION BLVD STE 200 CELEBRATION, FL 34747-5162

SUBJECT: PROPERTIES CONNECT LLC

Ref. Number: W12000048087

We have received your document for PROPERTIES CONNECT LLC and your check(s) totaling \$125.00. 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." andthe 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) 245-6051.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 212A00023431

www.sunbiz.org

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ART	ICL	ÆΙ	- N	ame:
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The name of the Limited Liability Company is:

E-Connect Properties 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 is:

Principal Office Address:	Mailing Address:
1420 Celebration Blvd Suite 200 Celebration,	23 West Central Entrance 352 Duluth MN 55811
FL 34747 -5162	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the residence in the property of the propert	Office, & Registered Agent's Signature:
Name	
1420 Celebration	Blvd Suite 200
Florida street addı	ress (P.O. Box <u>NOT</u> acceptable)
Celebration	_{FL} 34747 5162
City, Sta	te, 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)

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:

"MGR" = Manager	
'MGRM" = Managing Membe	r <u>.</u>
MGRM	Imran Zia
	1420 Celebration Blvd Suite 200
	Celebration FL 34747 -5162
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E V: Effective date, if other the ctive date is listed, the date is lays after the date of filing.) EEQUIRED SIGNATURE:	an the date of filing: (OPTIC nust be specific and cannot be more than five business member or an authorized representative of a member.
EV: Effective date, if other the ective date is listed, the date is lays after the date of filing.) EQUIRED SIGNATURE: Signature of a	nust be specific and cannot be more than five business

imran Zia

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)