## 112000140857

(Requestor's Name)
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B. BOSTICK

NOV - 6 2012

EXAMINER

## **COVER LETTER**

Division of	Corporations		
SUBJECT:A	rbor Place Affordable		
	Name of Limited	Liability Company	
The enclosed Article	s of Organization and fee(s) are su	bmitted for filing.	
Please return all corr	espondence concerning this matter	to the following:	
Peter 1	M. Wright, Esq.		
	Ŋ	Name of Person	_
	1	Firm/Company	
3060 P	eachtree Road, N.W., S	uite 900 Address	
		Address	
Atlant	a, GA 30305		Sing Sing
	City/	State and Zip Code	AH OV
rcoats	@tbf-inc.org		Sk in [
	•	future annual report notification)	PH PH
For further informati	on concerning this matter, please of	call:	ELC.
Peter M. Wri	ght	at (404)968-267	
Na	me of Person	Area Code & Daytime Telep	hone Number
Enclosed is a check	c for the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & 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 Ci Tallahassee, FL 32301	rcle

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Arbor Place Affordable Housing, LLC	,
(Must end with the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the pr	incipal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
3934 Bayshore Blvd. NE	c/o The Banyan Foundation, Inc.
St. Petersburg, FL 33703	P. O. Box 7091
	St. Petersburg, FL 33734
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	
The name and the Florida street address of the r	egistered agent are:
Robert B. Coats III	
Name	N.E.
_ 3934 Bayshore Blvd.,	N.E.
Florida street add	ress (P.O. Box NOT acceptable)

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..

City, State, and Zip

Registered Agent's Signature (REQUIRED)

St. Petersburg

(CONTINUED)

## 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 Member	Name and Address:
MGRM	The Banyan Foundation, Inc. P. O. Box 7091 St. Petersburg, FL 33703
	TS TO NO.
	- SEE ST
<del></del>	
(Use attachment if necessary)	
CLE V: Effective date, if other than t	the date of filing: (OPTIONAL
CLE V: Effective date, if other than t	the date of filing: (OPTIONAL t be specific and cannot be more than five business days
CLE V: Effective date, if other than teffective date is listed, the date mus	
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.)  REQUIRED SIGNATURE:	t be specific and cannot be more than five business days
CLE V: Effective date, if other than to effective date is listed, the date must 90 days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a men constitutes an affirmation ur 1 am aware that any false information.	

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)