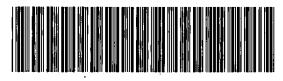
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(Re	equestor's Name)	
(Ad	dress)	
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(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

G. MCLEOD

DEC - 1 2012

EXAMINER



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G. MCLEOD

DEC -3 2012

EXAMINER



ACCOUNT NO. : I20000000195 REFERENCE: 4399647 4350901 AUTHORIZATION : COST LIMIT : \$ 160.00 ORDER DATE: November 30, 2012 ORDER TIME : 9:03 AM ORDER NO. : 439064-005 CUSTOMER NO: 4350901 DOMESTIC FILING NAME: MELODY LANE SOUTH II, LLC EFFECTIVE DATE: XX ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: ___ CERTIFIED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Stephanie Milnes - EXT. 52920

EXAMINER'S INITIALS:

COVER LETTER

то:	Registration Division of C	Section Corporations		
SUBJI	ECT:	Melody La	ne South II, LLC	
		Name of Limite	ed Liability Company	
The en	closed Articles	of Organization and fee(s) are s	submitted for filing.	
Please	return all corre	spondence concerning this matte	er to the following:	
		Patrick	Minnihan, Paralegal	
	•		Name of Person	
		Tarlow, Bree	ed, Hart & Rodgers, P.C.	
Firm/Company				
,		101 Huntin	gton Avenue, Suite 500	
			Address	
			ston, MA 02199 //State and Zip Code	
		·	ed@tbhr-law.com	
-		E-mail address: (to be used for	or future annual report notification)	
For fur	her information	n concerning this matter, please	call:	
	Patrick Minr	nihan, Paralegal	at (617) 218-2000	
	Name	e of Person	Area Code & Daytime Tel	ephone Number
Enclos	ed is a check t	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)	X \$160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclo
		Mailing Address Registration Section	Street/Courier Address Registration Section	
		Division of Corporations P.O. Box 6327	Division of Corporation Clifton Building	s
		Tallahassee, FL 32314	2661 Executive Center	Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

Melody Lane South II, 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	
ARTICLE II - Address:	
	y is:
Principal Office Address: Mailing Address:	
2880 Gulf Shore Boulevard North Jnit #107, Windsor Court Naples, FL 34103 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: Corporation Service Company Corporation Service Company	e rest
Name	
1201 Hays Street Florida street address (P.O. Box NOT acceptable) Tallahanna 22201	A. Arriva
Tallahassee FL 32301	

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..

Corporation Service Company

By: Stophanie Milnes Asst. V.P.

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGRM" = Managing Men	nber
MGR	William J. Heffron
	2 Melody Lane
•	Lynnfield, MA 01940
MGR	Nancy J. Heffron
	2 Melody Lane
	Lynnfield, MA 01940
	
(Use attachment if necessary	y)
FV. Effective data if other	er than the date of filing: (OPTION)
	te must be specific and cannot be more than five business da
days after the date of filing	

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.)

Richard P. Breed, III, Authorized Representative

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)