Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000284721 3)))

Electronic Filing Cover Sheet



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LAURENCE C HAMES, ESQ., P.A.

Account Number: I20090000075 : (407)622-4500 Phone : (407)622-4508 Fax Number

**Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please

1hames@hames-law.com Email Address:

FLORIDA LIMITED LIABILITY CO.

320 Stirling, LLC

Certificate of Status Certified Copy 01 Page Count Estimated Charge \$125.00

K. SALY EXAMINER DEC - 6 2012

Electronic Filing Menu Corporate Filing Menu

Help

H120002-4721 3

407-622-4508

(850) 245-6051.

COVER LETTER

TO: Registration Section
Division of Corporations

320 Stirling, LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Laurence C. Hames
Name of Person
Laurence C. Hames, Esq.
Firm/Company
130 S. Park Avenue
Address
Winter Park, Florida 32789
City/State and Zip Code
Ihames@hames-law.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Laurence C. Hames at 407 622-4500

Enclosed is a check for the following amount:

□\$125.00 Filing Fee Certificate of Status

□\$130.00 Filing Fee Certified Copy
(additional copy is enclosed)

□\$160.00 Filing Fee,
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

H12000284721 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Company is:	
320 Silrling, LLC		
(Must end with the w	ds "Limited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street a	dress of the principal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
200 Pasadena Piace	200 Pasadana Place	
Oriendo, Florida 32803	Orlando, Florida 32803	
(The Limited Liability Company cannot at business entity with an active Florida reg	nt, Registered Office, & Registered Agent's Signature: e as its own Registered Agent. You must designate an individual or another ration.) ddress of the registered agent are:	F11
(The Limited Liability Company cannot se business entity with an active Florida reg The name and the Florida street	e as its own Registered Agent. You must designate an individual or another ration.) ddress of the registered agent are:	
(The Limited Liability Company cannot at business entity with an active Florida reg	e as its own Registered Agent. You must designate an individual or another ration.) ddress of the registered agent are:	FILED TO
(The Limited Liability Company cannot se business entity with an active Florida reg The name and the Florida street	e as its own Registered Agent. You must designate an individual or another ration.) ddress of the registered agent are: don Name	FILED 9:
(The Limited Liability Company cannot at business entity with an active Florida reg The name and the Florida street Stephen E. Bri	e as its own Registered Agent. You must designate an individual or another ration.) ddress of the registered agent are: don Name	FILEU 9: 36
(The Limited Liability Company cannot at business entity with an active Florida reg The name and the Florida street Stephen E. Bri	e as its own Registered Agent. You must designate an individual or another ration.) ddress of the registered agent are: don Name	FILED 9: 36

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

H12000284721 3

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MOTOR - Managing Memoer	
MGR	Staphan E. Brandon
	200 Pasadena Place
	Orlando, Florida 32803
	_
41:	
(Use attachment if necessary)	
`	
LE V: Effective date, if other the	an the date of filing: (OPTION must be specific and cannot be more than five bush
ffective date is listed, the date or 90 days after the date of fili	must be specific and cannot be more than five bush

(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.)

Signature of a member or an authorized representative of a member.

Stephen E. Brendon, authorized Representative

Typed or printed name of signoc

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)

Page 2 of 2