

Feb 14, 2013 10:11 AM No. 55 Pa. 1/31

L13000023874

Florida Department of State
 Division of Corporations
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To: Division of Corporations
 Fax Number : (850) 617-6383

From: Account Name : WHWW, INC.
 Account Number : I20060000124
 Phone : (407) 246-6584
 Fax Number : (407) 645-3728

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

Email Address: jeisenbarth@rollins.edu

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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

**FLORIDA LIMITED LIABILITY CO.
 220 Fairbanks, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
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ARTICLES OF ORGANIZATION
OF
220 FAIRBANKS, LLC

ARTICLE I - NAME

The name of the limited liability company is 220 FAIRBANKS, LLC, ("Company").

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Company is:

Principal Office Address:

1000 Holt Avenue #2717
Winter Park, Florida 32789

Mailing Address:

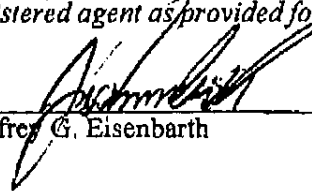
Attn: Jeffrey G. Eisenbarth,
1000 Holt Avenue #2717
Winter Park, Florida 32789

ARTICLE III - REGISTERED AGENT,
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

The name and the Florida street address of the registered agent are:

Jeffrey G. Eisenbarth
1000 Holt Avenue #2717
Winter Park, Florida 32789

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..



Jeffrey G. Eisenbarth

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ARTICLE IV - MANAGERS OR MANAGING MEMBERS

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

Title:
"MGR" = Manager
"MGMR" = Managing Member

Name and Address:

MGMR

Rollins College, a Florida not for profit
corporation
1000 Holt Avenue #2717
Winter Park, Florida 32789

REQUIRED SIGNATURE:



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.)

Jeffrey G. Eisenbarth

Typed or printed name of signer

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