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## Caldister Nebeker & McCullough

A PROFESSIONAL CORPORATION
ATTORNEYS AT LAW
PARKVIEW PLAZA 1
2180 SOUTH 1300 EAST, SUITE 600
SALT LAKE CITY, UTAH 84106
TELEPHONE 801-530-7300
FAX 801-537-1821

Andrew L. Howell

TO CONTACT WRITER DIRECTLY (801) 530-7305

E-MAIL ADDRESS ahowell@cnmlaw.com

March 11, 2013

Via U.S. First Class Mail

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re: 406 Mainsail, LLC

To Whom It May Concern,

Please accept this letter as our request to file the enclosed document listed below:

• Articles of Organization of 406 Mainsail, LLC (1 original, 1 copy).

I have enclosed a check, number 122875, in the amount of \$155.00 to cover the filing fee associated therewith, as well as the fee to obtain a Certified Copy of the filing. Accordingly, I have also enclosed one exact photocopy of the filing. Upon receipt, please file the enclosed document as quickly as possible and return a Certified copy to me in the self-addressed, stamped envelope provided.

Please do not hesitate to contact me at 801-530-7343 if you have any questions. Thank you for your attention to this matter.

Very truly yours,

Erica L. Anderson

Paralegal to Andrew L. Howell.

ALH/ela Encs.

### **COVER LETTER**

TO:	Registration S Division of Co				
	406	Mainsail, LLC			
SUBJI	ECT:		d Liability Comp	any	<del></del>
TC1		20 1111 116142	1 1 C. CT.		
		Organization and fee(s) are su			
Please	_	ondence concerning this matte	r to the following	;	
	Andrew	L. Howell			
		]	Name of Person		
	Calliste	r Nebeker & M	<b>1cCullo</b> u	ıgh	
			Firm/Company		
	2180 S	outh 1300 Eas	t, Suite	600	
			Address		
	Salt Lal	ke City, Utah 8	34106		
		•	State and Zip Cod	e	
	sak2009@	med.cornell.edu  E-mail address: (to be used fo	- 6-t	\((\)	
F. C	A	·	·	on notification)	
		concerning this matter, please of			
Eri	ca L. An	derson	at ( <u>801</u>	<sub>)</sub> 530-73	343
	Name	of Person	Area Cod	& Daytime Telep	hone Number
Enclos	sed is a check fo	or the following amount:			
□\$125.	.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	■\$155.00 Filin Certified Co (additional cop	рру	\$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	Registrate Division Clifton I	courier Address tion Section of Corporations Building ecutive Center C	ircle

Tallahassee, FL 32301

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

406 Mainsail, LLC	
(Must end with the words "Limite	ed 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:
100 Hillside Avenue	100 Hillside Avenue
Englewood, New Jersey 07631	Englewood, New Jersey 07631
business entity with an active Florida registration.)  The name and the Florida street address o  Corporation Service Compa	
1201 Hays Street	Name  SSA  Recet address (P.O. Box NOT acceptable)
1201 Hays Street	Name AND
1201 Hays Street Florida str Tallahassee	Name  SSE O  reet address (P.O. Box NOT acceptable)

(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" = Managing Member  MGR  Sandip Kapur  100 Hillside Avenue Englewood, New Jersey 07631  MGR  Marie Welshinger  100 Hillside Avenue Englewood, New Jersey 07631  MGR  Marie Welshinger  100 Hillside Avenue Englewood, New Jersey 07631  (Use attachment if necessary)  CLE V: Effective date, if other than the date of filting:	Title:	Name and Address:
MGR  Sandip Kapur  100 Hillside Avenue Englewood, New Jersey 07631  Marie Welshinger 100 Hillside Avenue Englewood, New Jersey 07631  (Use attachment if necessary)  CLE V: Effective date, if other than the date of filing:		
MGR  Marie Welshinger  100 Hillside Avenue  Englewood, New Jersey 07631   (Use attachment if necessary)  CLE V: Effective date, if other than the date of filing:  effective date is listed, the date must be specific and cannot be more than five business to or 90 days after the date of filing.)  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 documents of constitutes an affirmation under the penalties of perjury that the facts stated herein are fury.  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.)	"MGRM" = Managing Member	
Englewood, New Jersey 07631  Marie Welshinger  100 Hillside Avenue Englewood, New Jersey 07631  (Use attachment if necessary)  CLE V: Effective date, if other than the date of filing:	MGR	Sandip Kapur
(Use attachment if necessary)  CLE V: Effective date, if other than the date of filing:		100 Hillside Avenue
(Use attachment if necessary)  CLE V: Effective date, if other than the date of filing:		Englewood, New Jersey 07631
(Use attachment if necessary)  CLE V: Effective date, if other than the date of filing:	MGR	Marie Welshinger
(Use attachment if necessary)  CLE V: Effective date, if other than the date of filing:		
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Sandip Kapur, Member	CLE V: Effective date, if other that effective date is listed, the date to or 90 days after the date of filing REQUIRED SIGNATURE:	must be specific and cannot be more than five business ag.)
Typed or printed name of signee	CLE V: Effective date, if other that effective date is listed, the date of or 90 days after the date of filing REQUIRED SIGNATURE:  Signature of a material (In accordance with section constitutes an affirmation I am aware that any false)	must be specific and cannot be more than five business ag.)

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)