Division of Corporations Electronic Filing Cover Sheet

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.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA00000023

: (850)222-1092

Phone Fax Number

: (850)878-5368

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

Email Address:

FLORIDA LIMITED LIABILITY CO. ISLAND PLAZA HOLDINGS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

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Electronic Filing Menu

Corporate Filing Menu

Help

(850) 245-6051.

COVER LETTER

TO:	Registration 8 Division of Co			
SUBJ		PLAZA HOLDINGS,	LLC	
		Name of Limit	ted Liability Company	**************************************
The en	sclosed Articles o	f Organization and fee(s) are	submitted for filling.	
Please	return all corresp	ondence concerning this mat	ter to the following:	
	Jacquie Sey	mour		
		· · · · · · · · · · · · · · · · · · ·	Name of Person	
	Hendricks C	commercial Properties		
			Plrm/Company	- Special Control of the Control of
	655 Third St	treet, Suite 301	· · · · · · · · · · · · · · · · · · ·	
			····	3+3
	Beloit, Wi 5	3611	Address	
	Deloit, Wi O			્રેને સ્ત
	jacquie.seyn	ci nour@hendricksgroup	ry/State and Zip Code .net	
		E-mail address: (to be used	for future annual report notification)	ndige (19)
For fu	ther information	concerning this matter, please	call:	公司 こ
Todd	Burkett		256 539-6000	,
	Name	of Person	Area Code & Daytime Telep	hone Number
Enclos	sed is a check fe	or the following amount:		
=\$ 125	.00 Filing Fee	O\$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 C	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name: The name of the Limited Liability Company is! ISLAND PLAZA HOLDINGS, LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "L.L.C.") ARTICLE II - Address: The mailting address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Malling Address 655 Third Street 655 Third Street SUITE SUIT **106 Bills.** BOIGH, WI 53517 BBION, WI 53511 ARTICLE III - Registored Agent, Registered Office, & Registered Agent's Signature: (The Limbed Liability Company comot serve as its own Registered Agent. You must designess an individual or singular business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: C T Corporation System 1200 South Pine laland Road Plorids street address (P.O. Box NOT secoptable) Plantation, FE 33924 City, State, and Zip 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 cortificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of

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Registered Agent's Signature (RHQUIRED)

(CONTINUED)

all statutes relating to the proper and complete performance of my duties, and 1 am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Madonna Cuddihy Special Assistant Secretary

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGR	Diane M. Hendricks 690 Third Street, Suite 300 Beloit, Wi 53511	
·		
(Use attachment if necessary)		
RTICLE V: Effective date, if other than	ust be specific and cannot be more than five business days	. 10
REQUIRED SIGNATURE:	Tight —	ν Γ.,
Signature of a men	nber or an authorized representative of a member.	-
(In accordance with section (constitutes an affirmation unla maware that any falsa inf	608.408(3), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true. birmation submitted in a document to the Department of State only as provided for in s.817.155, F.S.)	
	Hendricks Typed or printed name of signee	

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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

Filing Fees: