Division of Corporations Electronic Filing Cover Sheet

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GAIL S ANDRE ACCOUNT Name : LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.

Account Number: 072720000036 : (407)843-4600 Phone

Fax Number : (407)843-4444

PLEASE ARRANGE FILING OF THE ATTACHED ARTICLES OF ORGANIZATION AND RETURN A CERTIFICATION TO ME AS SOON AS POSSIBLE. THANK YOU.

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Email Address:

FLORIDA LIMITED LIABILITY CO. C & P OWNERS GROUP, LLC

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ARTICLES OF ORGANIZATION OF C & P OWNERS GROUP, LLC



ARTICLE I - NAME

The name of this limited liability company is C & P OWNERS GROUP, LLC (the "Company").

ARTICLE II - PRINCIPAL OFFICE

The mailing address and street address of the principal office of the Company is 1925 Prospect Avenue, Orlando, Florida 32814.

ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Company is 215 N. Eola Drive, Orlando, Florida 32801, and the name of the initial registered agent of the Company at that address is Amanda F. Wilson.

ARTICLE IV - MANAGEMENT

The Company is a manager-managed limited liability company, and the initial manager of the Company is Cuhaci & Peterson, Architects, L.L.C., a Florida limited liability company.

Amanda F. Wilson, Authorized Representative of a Member

ACCEPTANCE OF REGISTERED AGENT

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, Florida Statutes.

Amenda E Wilson