

Division of Corporations

Page 1 of 1

**Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : GREENSPOON MARDER, P.A.  
Account Number : 076064003722  
Phone : (866) 491-1120  
Fax Number : (954) 343-6962

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

Email Address: ldressler@gmail.com

**FLORIDA LIMITED LIABILITY CO.  
BUENA VISTA MHP, LLC**

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

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TALLAHASSEE, FLORIDA

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Corporate Filing Menu

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**ARTICLES OF ORGANIZATION  
OF  
BUENA VISTA MHP, LLC**

**ARTICLE I - Name:**

The name of the Limited Liability Company is Buena Vista MHP, LLC.

**ARTICLE II - Duration:**

The period of duration for the Limited Liability Company shall begin with the filing of these Articles with the Florida Department of State, and shall exist perpetually, unless sooner dissolved in accordance with the Operating Agreement of the Limited Liability Company or Florida law.

**ARTICLE III - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is 49 S.W. Flagler Avenue, Suite 201, Stuart, Florida 34994.

**ARTICLE IV - Registered Agent:**

The name and address of the initial registered agent for this Limited Liability Company is Greenspoon Marder, P.A., 100 W. Cypress Creek Road, Suite 700, Fort Lauderdale, Florida 33309.

**ARTICLE V - Management:**

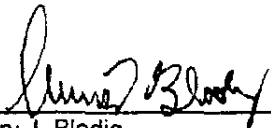
The Limited Liability Company is to be managed by a manager and the name and address of the initial manager who is to serve as manager is/are:

Bradley Dressler  
49 S.W. Flagler Avenue  
Suite 201  
Stuart, Florida 34994

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The managers of this Limited Liability Company: (i) may be replaced by the members, and (ii) shall be elected by the members, as provided for in the Operating Agreement of this Limited Liability Company.

Whereof, the undersigned member has executed these Articles the 16<sup>th</sup> day of May, 2014

  
\_\_\_\_\_  
Gregory J. Blodig,  
Authorized Representative of Member

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113, FLORIDA STATUTES,  
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING  
STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE  
STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Buena Vista MHP, LLC

2. The name and address of the registered agent and office is:

Greenspoon Marder, P.A. (the "Firm")  
100 W. Cypress Creek Road, Suite 700  
Fort Lauderdale, Florida 33309

By: \_\_\_\_\_

Gregory J. Blodig, For the Firm

*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, the Firm hereby accepts the appointment as registered agent and agrees to act in this capacity. The Firm further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and the Firm is familiar with and accepts the obligations of its position as registered agent.*

\_\_\_\_\_  
Gregory J. Blodig, For the Firm

(Signature)

May 16, 2014  
(Date)

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