

L14 0000819 33

Florida Department of State
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.

((H14000119452 3)))



H140001194523ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

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

From:

GAIL S ANDRE
Account Name : LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.
Account Number : 072720000036
Phone : (407) 843-4600
Fax Number : (407) 843-4444

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

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

Email Address: _____

RECEIVED

14 MAY 20 PM 3:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**FLORIDA LIMITED LIABILITY CO.
HANOVER EAGLE POINTE, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

2014 MAY 20 PM 3:16

Electronic Filing Menu

Corporate Filing Menu

Help

B. BOSTICK

**ARTICLES OF ORGANIZATION
OF
HANOVER EAGLE POINTE, LLC**

ARTICLE I - NAME

The name of this limited liability company is HANOVER EAGLE POINTE, LLC (the "Company").

ARTICLE II - PRINCIPAL OFFICE

The mailing address and street address of the principal office of the Company is 2420 S. Lakemont Ave., Ste 450, Orlando, Florida 32814.


ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Company is 2420 S. Lakemont Ave., Ste 450, Orlando, Florida 32814 and the name of the initial registered agent of the Company at that address is William S. Orosz, Jr.

ARTICLE IV - MANAGEMENT

The Company will be managed by one or more members and is, therefore, a member-managed limited liability company.

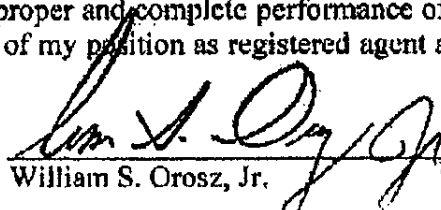
2014 MAY 20 10 15



William S. Orosz, Jr., Member or 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 605, Florida Statutes.



William S. Orosz, Jr.