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FILED



CORPORATI

ON SERVICE COMPANY.
ACCOUNT NO. : 12000000195
REFERENCE: 286043 4810936
AUTHORIZATION: Spelbelle 126.
COST LIMIT : \$155/00
ORDER DATE: September 5, 2014
ORDER TIME : 12:07 PM
ORDER NO. : 286043-015
CUSTOMER NO: 4810936
DOMESTIC FILING
NAME: BAINBRIDGE WOODSHIRE APARTMENTS, LLC
EFFECTIVE DATE:
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
XX CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Courtney Williams - EXT. 62935
FYAMINED'S INTUIALS.

COVER LETTER

Division of Corporations	
SUBJECT: Bainbridge Woodshire Apartments, LL Name of Limited	C Liability Company
The enclosed Articles of Organization and fee(s) are sub	mitted for filing.
Please return all correspondence concerning this matter	to the following:
Jeffrey A. Deutch	me of Person
PODA M.O.	
BCRA, LLC Fi	rm/Company
7777 Glades Road, Suite 300	Address
	Address
Boca Raton, FL 33434 City/St	ate and Zip Code
ideutch@broadandcassel.com E-mail address: (to be used for	future annual report notification)
For further information concerning this matter, please ca	n:
) 483-7000 a Code Daytime Telephone Number
Enclosed is a check for the following amount:	
Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy ditional copy is enclosed) S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations	Street/Courier Address Registration Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limite	d Liability Company is:				
Bainbridge Woodshir	e Apartments, LLC Must end with the words "Limited L	Liability Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address The mailing address and		ice of the Limited Liability Company is:			
Principal Office Addr	ess:	Mailing Address:			
12765 W. Forest Hill Suite 1307 Wellington, FL 33414	1	12765 W. Forest Hill Blvd. Suite 1307 Wellington, FL 33414			
(The Limited Liability	ered Agent, Registered Office, & Company cannot serve as its own R with an active Florida registration.	egistered Agent. You must designate an individual	or	281	
The name and the Flori	da street address of the registered a	gent are:		M SEP	-11
	BCRA, LLC		동그	70	
	Name		SSE	Ÿ	E
	7777 Glades Road, Suite 300	•	in.	-	,
	Florida street address (P.O. Box 1	NOT acceptable)	EST.	AH 9:	
	Boca Raton	FL 33434	四四百	Ü	
	City	Zip	S m		
		vice of process for the above stated limited liability of the appointment as registered agent and agree to ac		t	

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, F.S.,

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	Painhrides Manager III C
	Bainbridge Manager, LLC 12765 W. Forest Hill Blvd., Suite 1307
	Wellington, FL 33414
•	
·	
·	
(Use attachment if necessary)	
EV: Effective date, if other than the date of filling:	(OPTIONAL)
ective date is listed, the date must be specific and of filing.)	cannot be more than five business days prior to or 9
E VI: Other provisions, if any.	
• •	
	

Signature of a member of an authorized representative of a member. (In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true, 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.)

JEFFREY A. DEUTCH, authorized representative
Typed or printed name of signee

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)

ARTICLE IV-

Page 2 of 2

2014 SEP -5 AM 9: 31 SECRETARY OF STATE SECRETARY OF STATE