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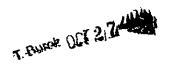
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THE CRETARY OF STATE ALLAHASSEE, FLORIDA



COVER LETTER

TO:	Registration Division of C	Section Corporations		
SUBJ	ECT: <u>105 RC</u>	DSEWOOD CIRCLE, LLC		
		Name of Lir	nited Liability Company	
The en	iclosed Articles	of Organization and fee(s) as	re submitted for filing.	
Please	return all corre	spondence concerning this m	natter to the following:	
		D. BRL	JCE KRATZ	_
			Name of Person	
		JECK,	HARRIS, RAYNOR & JONES	S, P.A.
			Firm/Company	
		790 JU	JNO OCEAN WALK, SUITE 6	00
			Address	
			BEACH, FL 33408	
			City/State and Zip Code	
_		E-mail address: (to be use	N@ARBORCAPITALMGT.CO d for future annual report notifica	otion)
For fu	ther informatio	n concerning this matter, plea	ase call:	
<u>D. Br</u>	uce Kratz	at (<u></u>	561) 746-1002 x 306	
	Nan	ne of Person	Area Code Daytime Tel	lephone Number
Enclos	ed is a check fo	or the following amount:		
□ \$125.0	00 Filing Fee	□\$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 Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limi	e ted Liability Company is:				
105 ROSEWOOD		ted Liability Company, "L.L.C.," or	r "LLC.")	_	
ARTICLE II - Addr The mailing address a		al office of the Limited Liability Con	mpany is:		
Principal Office Add	lress:	Mailing Address:			
50 Cobblestone La Williamsville, NY 1		50 Cobblestone Lane Williamsville, NY 14221	· · · · · · · · · · · · · · · · · · ·	_ _	
(The Limited Liability another business entire		,		vidual	or
	Jeck, Harris, Raynor & Jon		.CRE	99	
	Na		HAS:	12:	Diagrams Commission
	790 Juno Ocean Walk, Sui Florida street address (P.O. E		338 3 73	ω π	iscut prop
			F.S.	J Wd	STREET
	Juno Beach City	FL 33408 Zip	TATE ORIO	₩ 25	
the place designat capacity. I further a	ed in this certificate, I hereby acc agree to comply with the provision am familiar with and accept the	service of process for the above state cept the appointment as registered agns of all statutes relating to the propobligations of my position as register apter 605, F.S	gent and agree er and complei	to aci te perf	t in this formance

(CONTINUED)

Page 1 of 2

<u>litle:</u>	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	
<u>//GR</u>	Lawrence T. McGowan
	60 Cobblestone Lane
	Williamsville, NY 14221
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	<u> </u>
V: Effective date, if other than the daive date is listed, the date must be	ate of filing:, (OPTIONAL) specific and cannot be more than five business days prior to or 90
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