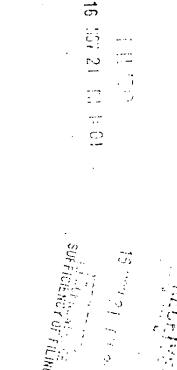
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificate	s of Status
Special Instructions to Fi	ling Officer:	
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C. GOLDEN NOV 2 2 2016

Phone: 850-558-1500 ACCOUNT NO. : 12000000195 REFERENCE: 377008 7448543 AUTHORIZATION : COST LIMIT : ORDER DATE: November 21, 2016 ORDER TIME : 1:07 PM ORDER NO. : 377008-010 CUSTOMER NO: 7448543 DOMESTIC FILING NAME: 7978 ASSOCIATES IX, LLC EFFECTIVE DATE: ARTICLES OF INCORPORATION _ CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY ___ PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER'S INITIALS:

CORPORATION SERVICE COMPANY

CONTACT PERSON: Melissa Zender - EXT.

1201 Hays Street

Tallhassee, FL 32301

COVER LETTER

TO:	Registration Section Division of Corporations
SUBJE	7978 Associates IX, LLC
SUBJE	Name of Limited Liability Company
The enc	losed Articles of Organization and fee(s) are submitted for filing.
Please re	eturn all correspondence concerning this matter to the following:
	Kim Taylor
	Name of Person
	Benderson Development Company, LLC
	Firm/Company
	7978 Cooper Creek Blvd, Suite 100
	Address
	University Park, Florida 34201
	City/State and Zip Code
	taxdepartment@benderson.com E-mail address: (to be used for future annual report notification)
For furt	her information concerning this matter, please call:
Kim Ta	
	Name of Person Area Code Daytime Telephone Number
Enclose	d is a check for the following amount:
\$125.00	Certificate of Status Certificate of Status Certificate of Status 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

6 ICV 21 IC FO

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANYO 1007 21 FR 1:01

ARTICLE I - Name: The name of the Limited Liability Company is:	
7978 Associates IX, LLC	
(Must end with the words "Limited I	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal off	ice of the Limited Liability Company is:
Principal Office Address: Mailin	g Address:
7978 Cooper Creek Blvd, Suite 100	7978 Cooper Creek Blvd, Suite 100
University Park, Florida 34201	University Park, Florida 34201
another business entity with an active Florida registration The name and the Florida street address of the registered Alicla H. Gayton	
Name	THE PROPERTY OF THE PROPERTY O
7978 Cooper Creek Blvd, Suit	e 100
Florida street address (P.O. Box	
University Park,	FL 34201
City	Zip
the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the obl	ure (REQUIRED)

Page 1 of 2

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	Devid II. Delderof
MGR	David H. Baldauf
	7978 Cooper Creek Blvd, Suite 100
	University Park, Florida 34201
MGR	Shaun Benderson
IVIGR	7978 Cooper Creek Blvd, Suite 100
	University Park, Florida 34201
	University Park, Florida 34201
(Use attachment if necessary)	
ective date is listed, the date must be s of filing.)	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90 de
ective date is listed, the date must be s of filing.)	nte of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90 de
REOUIRED SIGNATURE: Signature of a r (In accordance with section constitutes an affirmation I am aware that any false constitutes a third degree	member or an authorized representative of a member. on 605.0203 (1) (b), Florida Statutes, the execution of this document a under the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State efelony as provided for in s.817.155, F.S.)
REQUIRED SIGNATURE: Signature of a r (In accordance with section constitutes an affirmation I am aware that any false	member or an authorized representative of a member. on 605.0203 (1) (b), Florida Statutes, the execution of this document a under the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State efelony as provided for in s.817.155, F.S.)
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REOUIRED SIGNATURE: Signature of a reconstitutes an affirmation I am aware that any false constitutes a third degree David H. Bald	member or an authorized representative of a member, on 605.0203 (1) (b), Florida Statutes, the execution of this document in under the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State efelony as provided for in s.817.155, F.S.) Islauf, Manager Typed or printed name of signee
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REOUIRED SIGNATURE: Signature of a real firmation of a may aware that any false constitutes a third degree bavid H. Bald S125.00 Filing Fee for Articles of Constitutes o	member or an authorized representative of a member. on 605.0203 (1) (b), Florida Statutes, the execution of this document in under the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State efelony as provided for in s.817.155, F.S.) Hauf, Manager Typed or printed name of signee Filing Fees: Organization and Designation of Registered Agent

T."