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Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE : 334153 **AUTHORIZATION:** COST LIMIT : ORDER DATE: August 6, 2018 ORDER TIME : 1:04 PM ORDER NO. : 334153-010 CUSTOMER NO: 7448543 DOMESTIC FILING NAME: 7978 ASSOCIATES XVIII, LLC EFFECTIVE DATE: ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY XX PLAIN STAMPED COPY _ CERTIFICATE OF GOOD STANDING

EXAMINER'S INITIALS:

CONTACT PERSON: Emily Croft - EXT. 62925

CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301

COVER LETTER

	Registration Section Division of Corporations			
SUBJEC	7978 Associates XVIII, L	LC		
SUBJEC	Na	me of Limited Liability Company		
The enclo	osed Articles of Organization an	d fee(s) are submitted for filing.		
Please ret	nurn all correspondence concern	ing this matter to the following:		
	Kim Taylor			
		Name of Person		
	Benderson Development (Company, LLC		
		Firm/Company	TAL SE	-
	7978 Cooper Creek Blvd		CNC	AUG
		Address		i en
	University Park, Florida 34	1201		T.
		City/State and Zip Code	,_	7: lis
	taxdepartment@benderso			CF5
	E-mail	address: (to be used for future annual report notification)		
For furth	er information concerning this r	natter, please call:		
Kim Tay	dor	941 360-7259		
	Name of Person	at () Area Code Daytime Telephone Number		
r1	is a check for the following am	and:		
_	Filing Fee \$130.00 Filin Certificate of	g Fee & \$155.00 Filing Fee & \$160.00 Fil	of Status & opy	
	Mailing Address Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Clifton Building		

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

7978 Associates X	VIII, LLC		
	(Must end with the words	'Limited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address The mailing address		incipal office of the Limited Liability Company is:	
Principal Office Ad	dress:	Mailing Address:	
7978 Cooper Cree	k Bivd	7978 Cooper Creek Blvd	
University Park, Florida 34201		University Park, Florida 34201	
ARTICLE III - Reg	sistered Agent, Registered	Office, & Registered Agent's Signature:	
ARTICLE III - Reg (The Limited Liability another business ent	istered Agent, Registered by Company cannot serve a ity with an active Florida re orida street address of the r	Office, & Registered Agent's Signature:	;
ARTICLE III - Reg (The Limited Liability another business ent	istered Agent, Registered by Company cannot serve a ity with an active Florida re	Office, & Registered Agent's Signature:	3
ARTICLE III - Reg (The Limited Liability another business ent	istered Agent, Registered by Company cannot serve a ity with an active Florida re orida street address of the r	Office, & Registered Agent's Signature:	;
ARTICLE III - Reg (The Limited Liability another business ent	istered Agent, Registered by Company cannot serve a ity with an active Florida re orida street address of the r	Office, & Registered Agent's Signature: s its own Registered Agent. You must designate an individual egistration.) egistered agent are:	
ARTICLE III - Reg (The Limited Liability another business ent	ristered Agent, Registered by Company cannot serve a ity with an active Florida re orida street address of the r Alicia H. Gayton 7978 Cooper Creek E	Office, & Registered Agent's Signature: s its own Registered Agent. You must designate an individual egistration.) egistered agent are:	;
ARTICLE III - Reg (The Limited Liability another business ent	ristered Agent, Registered by Company cannot serve a ity with an active Florida re orida street address of the r Alicia H. Gayton 7978 Cooper Creek E	Office, & Registered Agent's Signature: s its own Registered Agent. You must designate an individual designate an individual designate agent are:	;

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 1905, §.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

itle:	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	
MGR	David H. Baldauf
	7978 Cooper Creek Blvd
	University Park, Florida 34201
MGR	Shaun Benderson
	7978 Cooper Creek Blvd
	University Park, Florida 34201
1GR	Stephen C. Scalione
	7978 Cooper Creek Blvd
	University Park, Florida 34201
V: Effective date, if other than tive date is listed, the date mu	the date of filing: (OPTIONAL) st be specific and cannot be more than five business days prior to or 90
V: Effective date, if other than tive date is listed, the date mu filing.)	
V: Effective date, if other than tive date is listed, the date mu filing.)	
tive date is listed, the date multiling.) VI: Other provisions, if any. REQUIRED SIGNATURE:	st be specific and cannot be more than five business days prior to or 90
V: Effective date, if other than tive date is listed, the date mufiling.) VI: Other provisions, if any. EQUIRED SIGNATURE:	st be specific and cannot be more than five business days prior to or 90
V: Effective date, if other than tive date is listed, the date mu filing.) VI: Other provisions, if any. EQUIRED SIGNATURE:	of a member or an authorized representative of a member.
V: Effective date, if other than tive date is listed, the date mu filing.) VI: Other provisions, if any. EQUIRED SIGNATURE: Signature (In accordance with constitutes an affirm	of a member or an authorized representative of a member. section 605.0203 (1) (b). Florida Statutes, the execution of this document mation under the penalties of perjury that the facts stated herein are true.
V: Effective date, if other than tive date is listed, the date mu filing.) VI: Other provisions, if any. EQUIRED SIGNATURE: Signature (In accordance with constitutes an affirm I am aware that any	of a member or an authorized representative of a member.
V: Effective date, if other than tive date is listed, the date mufiling.) VI: Other provisions, if any. EQUIRED SIGNATURE: Signature (In accordance with constitutes an affird constitutes a third constitu	of a member or an authorized representative of a member. section 605.0203 (1) (b). Florida Statutes, the execution of this document nation under the penalties of perjury that the facts stated herein are true. If also information submitted in a document to the Department of State

\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)