

L22000079367

Florida Department of State  
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**Email Address:** richard.lyons@lyons-law.com

**FLORIDA LIMITED LIABILITY CO.**

**FGCENT 217 DEL PRADO, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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FLORIDA DEPARTMENT OF STATE

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ARTICLES OF ORGANIZATION  
OF  
FGCENT 217 DEL PRADO, LLC

ARTICLE I - NAME

The name of the limited liability company is FGCENT 217 Del Prado, LLC,  
("Company").

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Company is:

Principal Office Address:  
2180 Immokalee Road, Suite 101  
Naples, Florida 34110

Mailing Address:  
2180 Immokalee Road, Suite 101  
Naples, Florida 34110

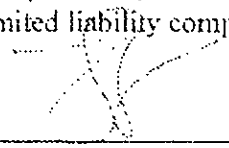
ARTICLE III - REGISTERED AGENT,  
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

The name and the Florida street address of the registered agent are:

L&L PARA, Ltd. Co.  
27911 Crown Lake Boulevard, Suite 201  
Bonita Springs, Florida 34110

*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.*

L&L PARA, Ltd. Co, a  
Florida limited liability company

By:   
Linda M. Stevens  
Its: Manager

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#### ARTICLE IV - MANAGERS OR MEMBERS

The name and address of each person authorized to manage and control the Company:

Title:

Name and Address:

"MGR" = Manager

"AMBR" = Authorized Member

MGR

Leela Lavasani  
2180 Immokalee Road, Suite 101  
Naples, Florida 34110

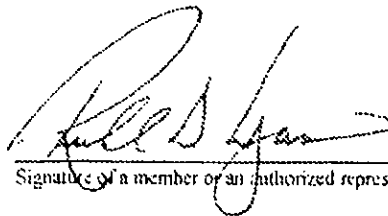
MGR

Patrick M. Reidy  
2180 Immokalee Road, Suite 101  
Naples, Florida 34110

MGR

Samuel L. Hill, III  
2180 Immokalee Road, Suite 101  
Naples, Florida 34110

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203(1)(b), Florida Statutes. 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.

Richard D. Lyons, Esq.

Typed or printed name of signer

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