

L 9600000/320  
TRANSMITTAL LETTER

FOR FLORIDA LIMITED LIABILITY COMPANY

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

400002021154--2  
-12/05/96--01073--002  
\*\*\*\*346.25 \*\*\*\*346.25

**SUBJECT:** DLR BAYSHORE BUILDING LLC  
(Proposed limited liability company name - must include suffix)

Enclosed is an original and one (1) copy of the articles of organization and a check for :

☐ \$285.00  
Filing Fee  
& Registered  
Agent designation

☐ \$293.75  
Filing Fee,  
Registered Agent  
Designation &  
Certificate

☐ \$337.50  
Filing Fee,  
Registered Agent  
Designation &  
Certified Copy

☒ \$346.25  
Filing Fee,  
Registered Agent  
Designation,  
Certified Copy &  
Certificate

**FROM:** DALE D HALLOCK  
Name (Printed or typed)

400 ESSEX COURT REGENCY PARK  
Address

OMAHA NE 68114-3778  
City, State & Zip

402 393 4100  
Daytime Telephone number

**NOTE:** Please provide the original and one copy of the articles.

Handwritten signature and date: 12/15/96



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

December 10, 1996

DALE D HALLOCK  
400 ESSEX COURT REGENCY PARK  
OMAHA, NE 68114-3778

SUBJECT: DLR BAYSHORE BUILDING LLC  
Ref. Number: W96000025824

We have received your document for DLR BAYSHORE BUILDING LLC and your check(s) totaling \$346.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the names and street addresses of the members or managers of the limited liability company.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6915.

Pamela Hall  
Document Specialist

Letter Number: 596A00055090

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY  
COMPANY**

**FILED**

96 DEC 18 AM 11:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

DLR BAYSHORE BUILDING LLC

**ARTICLE II - Address:**

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

MAIL: 400 ESSEX COURT REGENCY PARK OMAHA NE 68114

LOCATION: 601 W SWANN AVENUE TAMPA FL 33606

**ARTICLE III - Duration:**

The period of duration for the Limited Liability Company shall be:

THE LATEST DATE UPON WHICH THE COMPANY IS TO DISSOLVE IS DECEMBER 31, 2045

**ARTICLE IV - Management:**

(check and complete the appropriate statement)

- ☐ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

DALE D HALLOCK, MANAGER  
400 ESSEX COURT REGENCY PARK  
OMAHA NE 68114-3778

- ☐ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/ are:

DALE D HALLOCK, MANAGER  
400 ESSEX COURT REGENCY PARK  
OMAHA NE 68114-3778

## **ARTICLE V - Admission of Additional Members:**

The right, if given, of the remaining members to admit additional members and the terms and conditions of the admissions shall be:

THE COMPANY MAY ADMIT ADDITIONAL MEMBERS UPON THE MAJORITY VOTE OF ALL MEMBERS AS PROVIDED IN THIS OPERATING AGREEMENT OR AS REQUIRED BY LAW. THE SHARE OF COMPANY PROFITS, CREDITS AND LOSSES OF SUCH ADDITIONAL MEMBER SHALL BE DEFINED IN AN AMENDMENT TO THIS OPERATING AGREEMENT, AND THE COMPANY SHALL, IF REQUIRED BY LAW, PREPARE AND FILE AMENDED ARTICLES REFLECTING SUCH CHANGES.

## **ARTICLE VI - Members Rights to Continue Business:**

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be granted.

THE COMPANY SHALL BE DISSOLVED ONLY UPON THE OCCURRENCE OF ANY OF THE FOLLOWING EVENTS.

- (1) WHEN THE PERIOD FIXED FOR THE DURATION OF THE COMPANY SHALL EXPIRE
- (ii) BY THE UNANIMOUS WRITTEN CONSENT OF ALL THE MEMBERS
- (iii) WHEN LESS THAN TWO (2) MEMBERS OF THE COMPANY EXIST
- (iv) THE OCCURRENCE OF ANY EVENT WHICH WOULD MAKE UNLAWFUL THE CONTINUING EXISTENCE OF THE COMPANY
- (v) ANY OTHER EVENT CAUSING THE DISSOLUTION OF THE COMPANY PURSUANT TO LAW

**NOTE:** If no provisions are to be made in Article V and VI remove this page before submitting for filing with the Department of State.

## AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of \_\_\_\_\_

DLR BAYSHORE BUILDING LLC \_\_\_\_\_ deposes and says:

- 1) the above named limited liability company has at least two members
- 2) the total amount of cash contributed by the member(s) is \$ 225,000 .
- 3) if any, the agreed value of property other than cash contributed by member(s) is \$ NONE .  
A description of the property is attached and made a part hereto.
- 4) the amount of cash or property anticipated to be contributed by member(s) is \$ -0- .
- 5) the total amount of 2, 3, and 4 is \$ 225,000 .



Signature of a member or authorized representative of a member.  
(In accordance with section 608.408(3), Florida Statutes, the  
execution of this affidavit constitutes an affirmation under the  
penalties of perjury that the facts stated herein are true.)

**FILED**  
96 DEC 18 AM 11:31

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

\* SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE  
UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT  
IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF  
FLORIDA.

1. The name of the limited liability company is:

DLR BAYSHORE BUILDING LLC

2. The name and address of the registered agent and office is:

STANLEY M MERADITH

(Name)

601 WEST SWANN AVENUE

(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

TAMPA FLORIDA 33606

(City/State/Zip)

*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.*

  
(Signature)

12-4-96

(Date)

**Filing Fee: \$ 35 for Designation of Registered Agent**