

L99000002025

HINES NORMAN & ASSOCIATES, P.A.  
ATTORNEYS AT LAW

JAMES P. HINES  
RANDY MILLER  
CHRISTOPHER H. NORMAN  
JAMES P. HINES, JR.  
STEPHEN C. SULLIVAN

HYDE PARK PROFESSIONAL CENTER  
315 S. HYDE PARK AVENUE  
TAMPA, FLORIDA 33606

March 25, 1999

TAXATION  
CORPORATION & BUSINESS LAW  
ESTATE PLANNING & ADMINISTRATION

(813) 251-8659  
FAX (813) 254-6153

Secretary of State  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

400002821564--4  
-03/25/99--01073--008  
\*\*\*\*\*285.00 \*\*\*\*\*285.00

Re: **Certificate of Limited Partnership for OAKLEIGH SPECIALTIES, LTD.**  
**Articles of Organization For OAKLEIGH MANAGEMENT, LLC**

Dear Sir or Madam:

Enclosed are an original and one copy of the Certificate of Limited Partnership of OAKLEIGH SPECIALTIES, LTD., a Florida Limited Partnership. Please file the original Certificate, date stamp the copy, and return the copy to our office. Enclosed is a check in the amount of \$2,326.25 to cover the cost of the following expenses:

Filing Fee	\$1,750.00
Registered Agent Fee	<u>35.00</u>
Total	\$1,785.00

Enclosed also are an original and one copy of the Articles of Organization for OAKLEIGH MANAGEMENT, LLC. Please file the original Articles, date stamp the copy, and return the copy to our office. Enclosed is a check in the amount of \$285.00 to cover the cost of the following expenses:

Filing fee	\$250.00
Registered Agent Fee	<u>35.00</u>
	\$285.00

Very truly yours,

*James P. Hines*  
James P. Hines

JPH:cn  
Enclosures

Check: \$2,070  
cc: Arlene R. Oakley (w/o encls.)

L99-2025

Name	OKH2
Availability	
Document	
Examiner	
Updater	
Uploader	
Verifier	
Acknowledgment	
W. P. Verifier	



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

April 1, 1999

JAMES HINES  
HINES NORMAN & ASSOCIATES, P.L.  
315 S. HYDE PARK AVENUE  
TAMPA, FL 33606

SUBJECT: OAKLEIGH MANAGEMENT, LLC  
Ref. Number: W99000007849

We have received your document for OAKLEIGH MANAGEMENT, LLC and your check(s) totaling \$285.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective day must be specific and cannot be prior to the date of filing.

On the affidavit an amount must be listed if the amount is zero then zero must be listed in the blanks.,

If you have any questions concerning the filing of your document, please call (850) 487-6020.

Tammi Cline  
Document Specialist

Letter Number: 199A00016618

FILED  
99 APR -9 PM 5:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The undersigned person, desiring to form a limited liability company pursuant to the provisions of the Florida Limited Liability Company Act, hereby submits these Articles of Organization.

## ARTICLE I - Name

The name of the Limited Liability Company is OAKLEIGH MANAGEMENT, LLC.

## ARTICLE II - Address

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

1819 New Bedford Drive  
Sun City Center, Florida 33573

## ARTICLE III - Duration

The period of duration for the Limited Liability Company shall commence *upon filing with the Sec. of State* and shall thereafter be perpetual.

## ARTICLE IV - Management

The Limited Liability Company shall be managed by its sole member, and the name and address of said managing member are:

Arlene R. Oakley, as Trustee of the Arlene R. Oakley Revocable Trust  
1819 New Bedford Drive  
Sun City Center, Florida 33573

## ARTICLE V - Admission of Additional Members

The right, if given, of the members to admit additional members, and the terms and conditions of the admissions, shall be determined by the managing member referred to in Article IV hereinabove, said managing member being the initial sole member of the Limited Liability Company.

## ARTICLE VI - Members Rights To Continue Business

The remaining members of the Limited Liability Company, if any, shall be entitled 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.

**ARTICLE VII - Affidavit of Membership and Contributions**

The undersigned member of OAKLEIGH MANAGEMENT, LLC certifies that:

- a) the above-named limited liability company has one member;
- b) the total amount of cash contributed by the member is \$0.00
- c) the agreed value of property, other than cash, contributed by the member is none; and
- d) the total amount of cash and property contributed and anticipated to be contributed by the member is \$17,284

**IN WITNESS**, the undersigned member has executed these Articles, and hereby acknowledges that, 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.

*Arlene R. Oakley*

Arlene R. Oakley, as Trustee of the Arlene R. Oakley Revocable Trust,  
Sole Member

FILED  
99 APR -9 PM 5:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA


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

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

1. The name of the limited liability company is OAKLEIGH MANAGEMENT, LLC
2. The name and the Florida street address of the registered agent are:

James P. Hines, Esq.  
Hines & Associates, P.A.  
315 South Hyde Park Avenue  
Tampa, Florida 33606

*Having been named as registered agent and to accept service of process for the above-named 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.*

  
James P. Hines, Esq.

FILED  
99 APR -9 PM 5:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA