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CAPITOL SERVICES OF PARALEGAL & ATTORNI	A/b/a EY SERVICE BUREAU, IN	С.	
(Requestor's Name)	<u> </u>		
1406 Hays Street, S	Suite 2	_	
(Address)			
Tallahassee, FL 32	2301 (904) 656–3992	OFFICE USE ONLY	
(City, State, Zip)	(Phone #)		
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NEW FILINGS	AMENDMENTS		•
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NonProfit	Resignation of R.A., C	Officer/Director	
Limited Liability	Change of Registered	Agent	
Domestication	Dissolution/Withdrawa	ı	
Other	Merger		
OTHER FILINGS	REGISTRATION/ QUALIFICATION	OF LAMENAGE OF SERVING OF CHAINSTEE.	-
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Reinstatement

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Fictitious Name Name Reservation



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FLORIDA DEPARTMENT OF STATE

Katherine Harris Secretary of State

June 10, 1999

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CAPITOL SERVICES

TALLAHASSEE, FL

SUBJECT: SOLITUDE, L.L.C. Ref. Number: W99000013595

We have received your document for SOLITUDE, L.L.C. and your check(s) totaling \$337.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$337.50 payment.,

Your limited liability company name is unavailable, pursuant to section 608.406(4), Florida Statutes. Since it is not distinguishable from the name of an existing entity. Please select a new name and make the substitution in all apprpriate places. One or more words must be added to make the name distinguishable from the one presently on file.

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 (850) 487-6914.

Buck Kohr Corporate Specialist

Letter Number: 599A00031438

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TALLAHASSEE, TICHE

ARTICLES OF ORGANIZATION

FOR

FLORIDA LIMITED LIABILITY COMPANY



ARTICLE I - Name:

The name of the Limited Liability Company is:

AL'S SOLITUDE, L.L.C.

ARTICLE II - Address:

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

6900 S.E. Harbor Circle Stuart, Florida 34996

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be perpetual.

ARTICLE IV - Management:

The Limited Liability Company is to be managed by the members and the names and addresses of the managing members are:

Alan E. Devendorf 6900 S.E. Harbor Circle Stuart, Florida 34996

Lydia Devendorf 6900 S.E. Harbor Circle Stuart, Florida 34996

ARTICLE V - Affidavit of Membership and Contributions:

The undersigned authorized representative of the members of AL'S SOLITUDE, L.L.C. certifies:

- 1. the above named limited liability company has at least one member;
- 2. The total amount of cash contributed by the members is: \$ 25,000.00
- 3. if any, the agreed value of property other than cash contributed by the members is: \$ 0
- 4. The total amount of cash and property contributed and anticipated to be contributed by the members is: \$ 25,000.00

Dated: June 9, 1999

Jeffrey B. Scheer, Esq.

Authorized Representative of 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.)

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.

Ι.	The name of the limited liability company is: AL*S SOLITUDE, L.L.C.
2.	The name and the Florida street address of the registered agent are:
	National Corporate Research, Ltd., Inc.
	NAME
	1406 Hays Street #2
	Florida street address (P. O. Box NOT ACCEPTABLE)
	Tallahassee FL 32301 CITY, STATE AND 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.

Jaillen J. Hill, Process Agent

Filing Fee: \$35 for Designation of Registered Agent