

L99000004564

ATTORNEYS' TITLE

Requestor's Name

660 E. Jefferson St.

Address

Tallahassee, FL 32301

City/St/Zip

850-222-2785

Phone #

200002942922--0

-07/27/99--01049--028

\*\*\*\*285.00 \*\*\*\*285.00

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1- R.E.A.L. ACQUISITIONS, L.L.C.

2-

3-

4-

☒ Walk-in

☐ Pick-up time ASAP

☐ Certified Copy

☐ Mail-out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS

<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS

<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION

<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

FILED

07 JUL 27 PM 2:50

99 JUL 27

RECORDED

4:11:28

SL  
7-27-99

**ARTICLES OF ORGANIZATION**

**OF**

**R.E.A.L. ACQUISITIONS, L.L.C**

THE UNDERSIGNED, an authorized natural person, for the purpose of forming a limited liability company, under the provisions and subject to the requirements of the State of Florida, (particularly Chapter 608 of the Florida Code and the acts amendatory thereof and supplemental thereto, and known, identified, and referred to as the "Florida Limited Liability Company Act"), hereby certifies that:

**FIRST:** The name of the limited liability company (hereinafter called the "limited liability company") is:

R.E.A.L. ACQUISITIONS, L.L.C.

**SECOND:** The duration of the existence of the limited liability company shall be fifty (50) years.

**THIRD:** The principal office and mailing address of the limited liability company is:

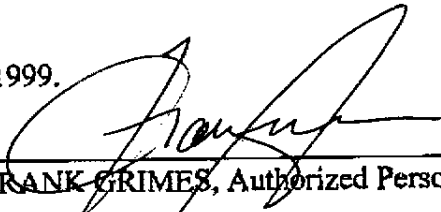
14802 N. Dale Mabry Highway  
Suite 202  
Tampa, Florida 33618

**FOURTH:** The name and address of the Registered Agent of the limited liability company shall be:

FRANK GRIMES  
14802 N. Dale Mabry Highway  
Suite 202  
Tampa, Florida 33618

Acceptance as Registered Agent:

EXECUTED this 23 day of July, 1999.

  
FRANK GRIMES, Authorized Person

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99 JUL 27 PM 2:50  
TAMPA, FLORIDA

**FIFTH:** The members of the limited liability company shall have the right, upon receipt of approval of a majority of the existing members, to admit additional members to the limited liability company.

**SIXTH:** In the event of 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 of the limited liability company, the remaining members may continue the business of the company by majority vote of the remaining members.

**SEVENTH:** The limited liability company shall be managed by a designated manager who shall serve in said capacity until the first annual meeting of members or until his successor is elected and qualified. The designated manager is:

FRANK GRIMES  
14802 N. Dale Mabry Highway  
Suite 202  
Tampa, Florida 33618

The management of the limited liability company need not be reserved to its members.

**EIGHTH: Affidavit of Membership and Contributions**


STATE OF FLORIDA  
COUNTY OF HILLSBOROUGH

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09 JUL 27 PM 2:50  
CLERK OF DISTRICT COURT  
HILLSBOROUGH, FLORIDA

The undersigned member or authorized representative of a member of R.E.A.L ACQUISITIONS, L.L.C., 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 \$4,000.00.
3. The agreed value of property other than cash contributed by member(s) is \$0.
4. The total amount of cash or property anticipated to be contributed by member(s) is \$4,000.00. This total includes amounts from 2 and 3 above.

5. The limited liability company will be managed by a designated manager.

  
FRANK GRIMES  
Authorized Representative

The foregoing instrument was acknowledged before me this 23 day of July, 1999, by FRANK GRIMES, who is personally known to me or who has produced Driver's License as identification and who did take an oath.



Tara E. Denhoff  
MY COMMISSION # CC816379 EXPIRES  
March 10, 2003  
BONDED THRU TROY FAIN INSURANCE, INC.

  
NOTARY PUBLIC Tara E. Denhoff  
STATE OF FLORIDA

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99 JUL 27 PM 2:50  
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: \_\_\_\_\_

R.E.A.L ACQUISITIONS, L.L.C

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

FRANK GRIMES

NAME

14802 N. Dale Mabry Highway, Suite 202

FLORIDA STREET ADDRESS (P. O. BOX NOT ACCEPTABLE)

Tampa, FL 33618

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.*

  
Signature

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99 JUL 27 PM 2:50  
TALLAHASSEE, FLORIDA