

ATTORNEYS' TITLE

Requestor's Name

660 E. Jefferson St.

Address

Tallahassee, FL 32301

850-222-2785

City/St/Zip

Phone #

L 99000005344

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

1- ST. PETE ARLINGTON LC

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-08/27/99--01001--014

****122.50 ****122.50

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99 AUG 26 AM 3:18
TALLAHASSEE, FLORIDA
DEPARTMENT OF STATE

☒ Walk-in

☐ Pick-up time ASAP

☒ Certified Copy

☐ Mail-out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input 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

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****215.00 ****215.00

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

8-27-99

RECEIVED
99 AUG 26 PM 3:46
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Examiner's Initials

RECEIVED
99 AUG 25 AM 11:54
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
OF
ST. PETE ARLINGTON, L.C.**

The undersigned, desiring to form a limited liability company under and pursuant to Chapter 608, *Florida Statutes*, does hereby certify as follows:

**ARTICLE I
NAME**

The name of the limited liability company is ST. PETE ARLINGTON, L.C. (the "Company").

**ARTICLE II
ADDRESS**

The mailing address and street address of the principal office of the Company is: 749 North Garland Avenue, Suite 102, Orlando, Florida 32801.

**ARTICLE III
DURATION**

The period of duration of the Company shall be perpetual.

**ARTICLE IV
MANAGEMENT**

The Company will be managed by the Members in accordance with the Operating Agreement. The initial Members of the Company will be:

Raymond D. Harrison	749 North Garland Avenue, Suite 102 Orlando, Florida 32801
A. Keith Holcomb, Jr.	749 North Garland Avenue, Suite 102 Orlando, Florida 32801
James Swegheimer	749 North Garland Avenue, Suite 102 Orlando, Florida 32801

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TALLAHASSEE, FLORIDA

**ARTICLE V
ADMISSION OF ADDITIONAL MEMBERS**

Additional Members may be admitted to the Company upon the approval of all Members.

**ARTICLE VI
OPERATING AGREEMENT**

The management and affairs of the Company will be conducted in accordance with the Operating Agreement of the Company adopted by the Members, as the same may from time to time be amended in accordance with the terms thereof.

**ARTICLE VII
TERMINATION OF MEMBERSHIP
AND CONTINUANCE OF BUSINESS**

The Company will not be dissolved upon the retirement, resignation or expulsion of a Member, or any other occurrence which terminates a Member's membership in the Company, unless the Members, other than the affected Member, vote unanimously that the Company be dissolved and liquidated.

**ARTICLE VIII
PURPOSE**

The Company's business and purpose will consist solely of the acquiring of real property and constructing, owning, holding, financing, selling, leasing, transferring, exchanging, operating and managing real property, and such other activities as are necessary, incidental or appropriate in connection therewith.

**ARTICLE IX
TITLE TO COMPANY PROPERTY**

All property owned by the Company shall be owned by the Company as an entity and, insofar as permitted by applicable law, no Member shall have any ownership interest in any Company property in its individual name or right, and each Member's interest in the Company shall be personal property for all purposes.

**ARTICLE IX
INITIAL REGISTERED OFFICE AND AGENT**

The street address of the initial registered office of the Company is 369 N. New York Avenue, 3rd Floor, Winter Park, Florida 32789, and the name of the initial registered agent of the Company at that address is James R. Pratt.

IN WITNESS WHEREOF, I have hereunto subscribed my name this 23rd day of August, 1999.



James R. Pratt
Authorized Agent for the Company

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09 AUG 26 AM 8:18
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TALLAHASSEE, FLORIDA

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

Pursuant to the provisions of Section 608.415, *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: ST. PETE ARLINGTON, L.C.
2. The name and the Florida street address of the registered agent and office are:

James R. Pratt
c/o Graham, Clark, Jones, Builder, Pratt & Marks
369 N. New York Avenue, 3rd Floor
Winter Park, Florida 32789

By: _____


James R. Pratt
Authorized Agent for the Company

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.

JAMES R. PRATT

Dated this 23rd day of August, 1999.

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CLERK OF STATE
TALLAHASSEE, FLORIDA

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTION

The undersigned authorized agent for ST. PETE ARLINGTON, L.C., deposes and says:

1. ST. PETE ARLINGTON, L.C., a Florida limited liability company (the "Company") has at least one (1) Member.
2. The total amount of cash contributed by the Members of the Company is \$2,000.00.
3. The agreed value of property other than cash to be contributed by Members of the Company is approximately \$ -0-.
4. The total amount of cash and property anticipated to be contributed by Members of the Company is \$ -0-.
5. The total of the amounts listed in Paragraphs 2, 3 and 4 is \$2,000.00.

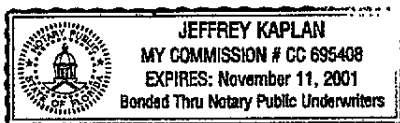


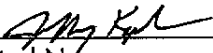
James R. Pratt
Authorized Agent for the Company

(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.)

STATE OF FLORIDA
COUNTY OF ORANGE

The foregoing instrument was acknowledged before me this 23rd day of August, 1999, by James R. Pratt. He is personally known to me.





Printed Name:
NOTARY PUBLIC
My Commission Expires:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA