-99000006449

August 24, 1999

Registration Section Division of Corporations P O Box 6327 Tallahassee, FL 32314

300002972463--7 -08/27/99--01074--003 ****285.00 ****285.00

-08/27/99-0107/

Gentlemen:

Enclosed please find The Articles of Organization For Florida Limited Liability Company, Certificate of Designation of Registered Agent/Registered Office, and our check in the amount of \$285.00. Please process our application immediately.

W99-20289

Rene A Remund 5660 Roosevelt Blvd. Ste 625 Clearwater, FL 33760 727-725-539-1900

99 AUG 27 PH 4: 07

SECRLIARY OF STATE
TALLAHASSEE FLORIDA



September 1, 1999

RENE A. REMUND 5660 ROOSEVELT BLVD STE 625 CLEARWATER, FL 33760

SUBJECT: 6301 MEMORIAL BUILDING TRUST, L.L.C.

Ref. Number: W99000020289

We have received your document for 6301 MEMORIAL BUILDING TRUST, L.L.C. 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 application you submitted is not suitable for scanning. Please complete the enclosed blank application neatly. Please be sure that the name appears identically throughout the document.

Your answer in Article 5 is unclear. If the members are given the right to continue business, please state under what conditions they are given this right.

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) 487-6958.

Lee Rivers Document Specialist

Letter Number: 799A00043539



September 15, 1999

EUGENE M. LEFLOCH 2625 PARK TOWER 400 N. TPA STREET TAMPA, FL 33602

SUBJECT: 6301 MEMORIAL BUILDING TRUST, L.L.C.

Ref. Number: W99000020289

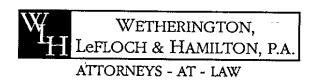
We are sending this application and our original letter to your address, because when we sent it to the principle address it was returned by the post office. Please refer to the attached envelope, and be sure that your address is correct when you complete the new, blank application.

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) 487-6958.

Lee Rivers Document Specialist

Letter Number: 299A00045295



2625 Park Tower 400 North Tampa Street Tampa, Florida 33602

Phone: (813) 225-1918 Fax: (813) 225-2531

September 20, 1999

Lee Rivers
Document Specialist
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re:

6301 Memorial Building Trust L.L.C.

Ref. Number: W99000020289

Dear Lee Rivers:

Pursuant to your written request of September 1, 1999 (copy enclosed), enclosed herewith is the corrected application.

Should you have any questions, please do not hesitate to call me.

Yours faithfully,

Unsigned to avoid delay how Eugene M. LeFloch

EML/kd

Enclosure

0Remund/Real Estate/852.9903.1



September 23, 1999

EUGENE M. LEFLOCH 2625 PARK TOWER 400 N. TPA STREET TAMPA, FL 33602

SUBJECT: 6301 MEMORIAL BUILDING TRUST, L.L.C.

Ref. Number: W99000020289

We have received your document for 6301 MEMORIAL BUILDING TRUST, L.L.C. and your check(s) totaling \$285.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

In Article IV, please check the appropriate box.

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) 487-6958.

Lee Rivers Document Specialist

Letter Number: 099A00046586



September 29, 1999

EUGENE M. LEFLOCH 2625 PARK TOWER 400 N. TPA STREET TAMPA, FL 33602

SUBJECT: 6301 MEMORIAL BUILDING TRUST, L.L.C.

Ref. Number: W99000020289

We have received your document for 6301 MEMORIAL BUILDING TRUST, L.L.C. 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 choices in Article IV are "either/or;" you must choose one box OR the other, but not both. Please indicate which of the two choices you have chosen, and we will file your document accordingly.

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) 487-6958.

Lee Rivers Document Specialist

Letter Number: 299A00047479

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

6301 Memorial Building Trust, L.L.C.

ARTICLE II - Address:

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

5770 Roosevelt Boulevard, #625 Clearwater, Florida 33760

ARTICLE III - Duration:

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

Percetual

ARTICLE IV - Management: (Check the appropriate box and complete the 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:

First Commercial RE Services, Inc. 5770 Roosevelt Blvd., #625 Clearwater, FL 33760

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:

Rene A. Remund

First Commercial RE Services, Inc.

5770 Roosevelt Blyd, #525

Clearwater, FL 33750

AND 27 PM 4: 08

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:

Approval and Instructions from the O & L Family Trust

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:

To manage the LLC for the benfit of the O & L Family Trust

ARTICLE VII - Affidavit of Membership and Contributions

Trust, L.L.Ccer	tifies:				
 the above named limited liability company has at least one member; the total amount of cash contributed by the member(s) is 	\$ <u>100</u>	.00	<u></u>		
3) if any, the agreed value of property other than cash contributed by member(s) is (A description of the property is attached and made a part hereto.); and	\$ <u> </u>			_;	
4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is	\$.00		· -	<u></u> .
	14.2			,-=u	
Signature of a member of a set barbar of the signature of a member of a set barbar of the signature of the s	SECK!	99 AUG	econfined	# (1-1-2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	
Signature of a member of an authorized representative of a member (In accordance with section 608.408(3), Florida Statutes, the execution of the affidavit constitutes an affirmation under the penalties of perjury that the fact stated herein are true.)	SS 2	27 PM 4:			
Rene A. Remund Typed or printed name of signee	DA TE	80		,	

Filing Fee: \$250.00 for Articles and Affidavit

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: 6301 Memorial Building 7	rust, L.L.C.	
2.	The name and the Florida street address of the registered agent are:	99 AUG 27 PM 4: 08 SECRETARY OF STATE TALLAHASSEE FLORIBA	
	2625 Park Tower, 400 N. Tampa St. Florida street address (P. O. Box NOT ACCEPTABLE)		
	Tampa FL 33602 CITY, STATE AND ZIP		· w

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

Filing Fee: \$ 35 for Designation of Registered Agent