

L990000006893



ACCOUNT NO. : 072100000032

REFERENCE : 389468 85036A

AUTHORIZATION :

COST LIMIT : \$ ~~337.50~~ 155.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 OCT - 1 PM 4:14

ORDER DATE : September 28, 1999

ORDER TIME : 11:06 AM

ORDER NO. : 389468-005

CUSTOMER NO: 85036A

400002999124--3

CUSTOMER: Robert A. Forlizzo, Esq
FORLIZZO & NEAL
FORLIZZO & NEAL
Suite 300
13577 Feather Sound Drive
Clearwater, FL 33762

W99-22427

DOMESTIC FILING

NAME: MAR, L.C.

MJH

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
____ CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
____ PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Angie Glisar

EXAMINER'S INITIALS:

RECEIVED
99 SEP 29 PM 12:06
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

September 29, 1999

CSC
ATTN: ANGIE GLISAR

SUBJECT: MAR, L.C.
Ref. Number: W99000022427

We have received your document for MAR, L.C. and the authorization to debit your account in the amount of \$337.50. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

The document must contain the entity's complete mailing address.

Pursuant to section 608.409, Florida Statutes, the effective date specified in the articles of organization must be within 5 business days of the date of receipt. Our office received your document on . Please amend 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) 487-6967.

Michelle Hodges
Document Specialist

Letter Number: 599A00047431

RESUBMIT

Please give original
submission date as file date.

RECEIVED

99 OCT -8 PM 3: 09

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

October 12, 1999

CSC
ATTN; ANGIE GLISAR

SUBJECT: MAR, L.C.
Ref. Number: W99000022427

We have received your document for MAR, L.C. and the authorization to debit your account in the amount of \$337.50. However, the document has not been filed and is being returned for the following:

You failed to make the correction(s) requested in our previous letter.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

If you want this filing back dated to September 28, it must meet the filing requirements for that date, therefore, you must select a new name.

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) 487-6967.

Michelle Hodges
Document Specialist

Letter Number: 299A00049207

RECEIVED
99 OCT 20 PM 3:15
DIVISION OF CORPORATIONS
TALLAHASSEE FLORIDA

*file 10/1/99
per Angie*

ARTICLES OF ORGANIZATION
OF
MAR, L.C.

The undersigned Member adopts the following Articles of Organization pursuant to the provisions of the Florida Limited Liability Company Act (the "Act").

ARTICLE I.
NAME OF COMPANY

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

ARTICLE II.
PERIOD OF DURATION

The Company's period of duration shall commence on October 18, 1999, and shall terminate on December 31, 2030.

ARTICLE III.
REGISTERED OFFICE AND AGENT

The Company's mailing address and principal office is as follows: 1408 North Westshore Boulevard, Suite 1002, Tampa, Florida 33607. The name and address of the Company's initial registered agent in the State of Florida is as follows: Robert A. Forlizzo, Esquire, FORLIZZO & NEAL, P.A., 13577 Feather Sound Drive, Suite 300, Clearwater, Florida 33762.

ARTICLE IV.
REQUIREMENTS FOR ADMISSION OF ADDITIONAL MEMBERS

Additional persons may be admitted to the Company as Members and membership interests may be created and issued to these persons upon the approval of holders of at least fifty-one percent (51%) of the remaining Members entitled to vote. The Members entitled to vote are as specified with the Company's Operating Agreement and Regulations.

ARTICLE V.
DISSOLUTION AND RIGHT TO CONTINUE BUSINESS

The Company shall be dissolved upon the first to occur of the following:

- A. The expiration of the term of the Company;
- B. The written consent of fifty-one percent (51%) of the Members entitled to vote as specified within the Company's Operating Agreement and Regulations.

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- C. The death, retirement, resignation, expulsion, dissolution or bankruptcy of a Member, or any other event which terminates the membership of a Member in the Company, unless within ninety (90) days after such event all of the remaining Members agree in writing to continue the business of the Company.

ARTICLE VI. MANAGEMENT

The Company will be managed by one (1) Manager in accordance with the Company's Operating Agreement and Regulations. The name and business address of the sole initial Manager who shall serve until the first annual meeting of Members or until its successor(s) is elected and qualified is:

NAME

ADDRESS

ALFRED S. AUSTIN

1408 North Westshore Boulevard, Suite 1002
Tampa, FL 33607

ARTICLE VII. PURPOSE


The Company is organized for any lawful purpose for which a limited liability company may be organized pursuant to the Act.

IN WITNESS WHEREOF, the following Member has executed these Articles of Organization on this 6th day of August, 1999.


ALFRED S. AUSTIN, Member

STATE OF FLORIDA)
COUNTY OF HILLSBOROUGH)

The foregoing instrument was acknowledged before me this 6th day of August, 1999, by ALFRED S. AUSTIN. He is personally known to me.


Notary Public
State of Florida
My Commission Expires:

**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 IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

MAR, L.C.

2. The name and address of the Registered Agent and Office is:

Robert A. Forlizzo, Esquire
FORLIZZO & NEAL, P.A.
13577 Feather Sound Drive, Suite 300
Clearwater, FL 33762

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.


ROBERT A. FORLIZZO