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From:
Account Name : HILL, WARD & HENDERSON, P.A. II
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LIMITED LIABILITY COMPANY

Walter Boos, LLC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Certificate of Status	1
Certified Copy	1
Page Count	02
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the limited liability company is: **Walter Boos, LLC**

ARTICLE II - Address

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

**4320 West Kennedy Boulevard
Tampa, Florida 33609**

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.

ARTICLE V - Registered Office/Registered Agent

The name of the Limited Liability Company's registered agent is Michael L. Bronson, and his address is 4320 West Kennedy Boulevard, Tampa, Florida 33609.

Michael L. Bronson

Signature of a member or an authorized representative of a 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.)

Michael L. Bronson, member

Typed or printed name of signee

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TALLAHASSEE, FLORIDA

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

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or SECTION 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:
Walter Boos, LLC

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

Michael L. Bronson
4320 West Kennedy Boulevard
Tampa, Florida 33609

Having been named 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.

Michael L. Bronson
Michael L. Bronson

Date: 5.10.00

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