

Division of Corporations

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From:

Account Name : MICHAEL A. PYLE, P.A.  
Account Number : I20000000053  
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LIMITED LIABILITY COMPANY

REZOLIN HOLDING COMPANY, LLC

Certificate of Status	0
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TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATION

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# ARTICLES OF ORGANIZATION OF REZOLIN HOLDING COMPANY, LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Chapter 608, *Florida Statutes*, hereby executes the following Articles of Organization.

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## ARTICLE I NAME

The name of the Limited Liability Company is:

**REZOLIN HOLDING COMPANY, LLC.**

## ARTICLE II ADDRESS

The street address and the mailing address of the principal office of the Company is **131-A Business Center Drive, Unit #7, Ormond Beach, Florida 32174.**

## ARTICLE III REGISTERED OFFICE AND AGENT

The name and Florida street address of the registered agent is **Trisha L. Dellinger, 1265 W. Granada Boulevard, Suite 1, Ormond Beach, Florida 32174**

**IN WITNESS WHEREOF**, the undersigned Authorized Representative has executed these Articles of Organization on this 30 day of September, 2002.

*Carl A. Dellinger*

**CARL A. DELLINGER**  
Authorized Representative

**STATE OF FLORIDA  
COUNTY OF VOLUSIA**

The foregoing instrument was acknowledged before me this 30<sup>th</sup> day of September, 2002, by **CARL A. DELLINGER** who  is personally known to me, or  who presented a Florida drivers license or  a \_\_\_\_\_ drivers license or  \_\_\_\_\_ as identification.




*Kristin L. Strother*  
Notary Public  
**Kristin L. Strother**  
(Printed Name)  
My Commission Expires:

(In accordance with Section 608.408(2), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

**ACCEPTANCE OF DESIGNATION**

Having been named Registered Agent to accept service of process for the above stated Limited Liability Company at the place designated in the above Articles of Organization, I hereby accept the appointment as registered agent and 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 provided in Chapter 608, Florida Statutes.

  
**TRISHA L. DELLINGER**, Registered Agent

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