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DIVISION OF CORPORATION 03 JAN -2 AH H: 39 ROW KIND

03 JAN -2 PH 3: 23

ARTICLES OF ORGANIZATION FOR H	FLORIDA LIMITED LIABILITY CO	OMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:		
EPIL SA	AXON, LLC	
ARTICLE II - Address:		
The mailing address and street address of the princi	ipal office of the Limited Liability Company	is:
Mailing Address	_ Street Address	
Post Office Box 3010 Winter Park, Florida 32790-3010	250 South Park Avenue, Suite 63 Winter Park, Florida 32789	0
ARTICLE III - Registered Agent, Registered Of	ffice, & Registered Agent's Signature:	
The name and the Florida street address of the regis	stered agent are:	
W.P.	Battaglia	
· · · · · · · · · · · · · · · · · · ·	Name	
	rk Avenue, Suite 630	
Florida street address ((P.O. Box <u>NOT</u> acceptable)	
	ark, Florida 32789	
City, Si	tate, and Zip	
Having been named as registered agent and to accept ser the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions of my duties, and I am familiar with and accept the oblic Chapter 608, Florida Statues.	the appointment as registered agent and agree of all statutes relating to the proper and complete	to act in this performance
 ₩.0.	(Say	
Registered A	Agent's Signature	
Article IV - Management (Check box if applicab	ole.)	
☐ The Limited Liability Company is to be manage a manager - managed company.	ed by one manager or more managers and is,	therefore,
(An additional article must be ad	dded if an effective date is requested)	
Signature of a member or an au	3 cut- uthorized representative of a member.	
(In accordance with section 608.4 of this document constitutes an aff	408(3), Florida Statutes, the execution firmation under the penalties of perjury ated herein are true.)	03 JAN -2 PH 3
W.P. Battaglia, author	rized representative of member	Ε (ω)

Typed or printed name of signee

FILING FEES:
\$100.00 Filing Fee for Articles of Organization
\$25.00 Designation of Registered Agent
\$30.00 Certified Copy (OPTIONAL)
\$5.00 Certificate of Status (OPTIONAL)

GRAY, HARRIS & ROBINSON, P.A.

SUITE 660

301 SOUTH BRONOUGH ST (32301

P.O. BOX 11189

TALLAHASSEE, FLORIDA 32302-318

TEL 850-222-7717

тец 850-577-909

FAX 850-222-3

rax 850-577-3311 web grayliarris.com

E-MAIL ADDRESS kjusevitch@grayharris.com

January 2, 2003

Division of Corporations George Firestone Building 409 East Gaines Street Tallahassee, Florida 32301 Via Hand Delivery

To Whom It May Concern:

Enclosed for filing, please find the ARTICLES OF ORGANIZATION, along with a check in the amount of \$155.00 for the applicable filing fees and for a CERTIFIED COPY for the following entity:

EPIL SAXON, LLC

Upon receipt, please "date stamp" the copy of this letter provided, and call me at 222-7717, when the document is ready. Thank you for your assistance in this matter.

Sincerely,

Karen F. Juseyitch, Paralegal

/kfj

Enclosures