

L030000003060

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H03000033167 5)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 205-0383

From: Account Name : ANSBACHER & SCHNEIDER, PA
Account Number : 072647001172
Phone : (904) 296-0100
Fax Number : (904) 296-2842

RECEIVED

03 JAN 27 PM 2:46

DIVISION OF CORPORATIONS

LIMITED LIABILITY COMPANY

LEWMIKE, L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

03 JAN 27 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AND
FILED

Handwritten initials and date: F27-03

H03000033167 5

**ARTICLES OF ORGANIZATION OF
LEWMIKE, L.L.C.**

ARTICLE I

The name of this Limited Liability Company shall be LEWMIKE, L.L.C., a limited liability company.

ARTICLE II

LEWMIKE, L.L.C. shall have perpetual existence.

ARTICLE III

LEWMIKE, L.L.C. is created to engage in any lawful act, business or activity for which limited liability companies may be formed under the laws of the State of Florida and to do any and all other things which are necessary, desirable or incidental to the foregoing purpose.

ARTICLE IV


The principal place of business of LEWMIKE, L.L.C. shall be 5150 Belfort Road, Building 100, Jacksonville, Florida 32256 and the mailing address shall be P.O. Box 551260, Jacksonville, Florida 32255 and such other place or places as the Member from time to time may determine.

The initial registered agent of LEWMIKE, L.L.C. shall be Michael N. Schneider whose address is 5150 Belfort Road, Building 100, Jacksonville, Florida, 32256.

ARTICLE V

LEWMIKE, L.L.C. will be managed by its Members.

IN WITNESS WHEREOF, these Articles of Organization have been duly executed.



Michael N. Schneider
Authorized Representative

Michael N. Schneider
Fl. Bar No. 166929
P.O. Box 551260
Jacksonville, FL 32255-1260
(904) 296-0100

H03000033167 5

03 JAN 27 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECORDED
AND
FILED

H03000033167 5

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

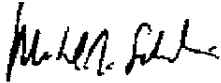
Pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned limited liability company submits the following statement in designating the registered office/registered agent, in the State of Florida.

The name of the organization is LEWMIKE, L.L.C., a Limited Liability Company.

The name and address of the registered agent and office is:

Michael N. Schneider
5150 Belfort Road, Building 100
Jacksonville, FL 32256

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.



Michael N. Schneider, Registered Agent

January 27, 2003
Date

H03000033167 5

03 JAN 27 PM 3:00
SECRETARY OF STATE
FALLAHASSE, FLORIDA

APPROV
AND
FILED