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**H1000090968**

Florida Department of State  
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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : ARNOLD MATHENY & EAGAN, P.A.  
Account Number : I20000000141  
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Fax Number : (407) 841-8746

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**FLORIDA LIMITED LIABILITY CO.  
36 ELEPHANTS LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

EFFECTIVE DATE 8/30/10

**D. BRUCE**

AUG 30 2010

**EXAMINER**

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**ARTICLES OF ORGANIZATION FOR LIMITED LIABILITY COMPANY**

**ARTICLE I – Name:**

The name of the Limited Liability Company is: **36 ELEPHANTS LLC**

**ARTICLE II – Address:**

The mailing address is **P. O. Box 936, Winter Park, FL 32790** and street address of the principal office of the Limited Liability Company is **1728 Barcelona Way, Winter Park, FL 32789.**

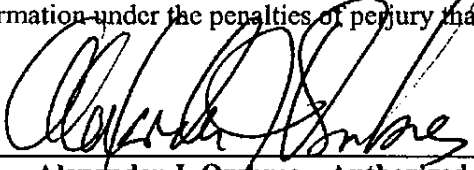
**ARTICLE III – Management:**

The Limited Liability Company is a manager-managed Limited Liability Company. The Limited Liability Company shall be managed by the managers who are designated, appointed or elected to act in such capacity in accordance with the Operating Agreement of the Limited Liability Company. **F. Ashley Allen and Bradley B. Wegner** whose address is **1728 Barcelona Way, Winter Park, FL 32789** are designated Managers.

**ARTICLE IV – Effective Date**

The effective date for the filing of the Articles of Organization shall be **August 30, 2010.**

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)



**Alexander J. Ombres – Authorized Representative**

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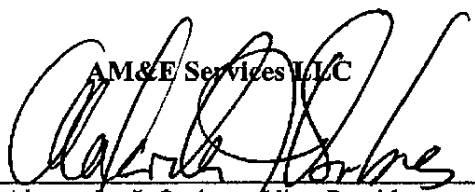
**CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is **36 ELEPHANTS LLC**
- 2. The name and the Florida street address of the registered agent are:

**AM&E Services LLC**  
**605 East Robinson Street, Suite 730**  
**Orlando, Florida 32801**

*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.*

By:   
 Alexander J. Ombres, Vice-President

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