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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

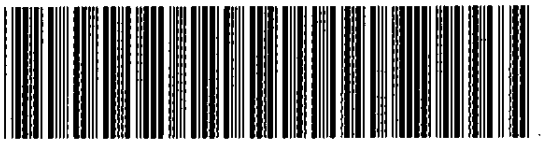
(Business Entity Name)

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TALLAHASSEE, FLORIDA

B. BOSTICK

MAY - 8 2012

EXAMINER

CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 192431 149697A

AUTHORIZATION :

COST LIMIT : $ 125.00

ORDER DATE : May 4, 2012

ORDER TIME : 3:24 PM

ORDER NO. : 192431-005

CUSTOMER NO: 149697A

DOMESTIC FILING

NAME: SUMMERPORT CAPITAL, LLC

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Kimberly Moret - EXT. 2949

EXAMINER'S INITIALS: _____

ARTICLES OF ORGANIZATION
FOR
SUMMERPORT CAPITAL, LLC

The undersigned, desiring to form a limited liability company under and pursuant to Florida Statute 608 entitled "Florida Limited Liability Company Act," does hereby adopt the following Articles of Organization for such company:

ARTICLE I - NAME

The name of the company shall be: SummerPort Capital, LLC (the "Company")

ARTICLE II - ADDRESS

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

121 Garfield Avenue
Winter Park, Florida 32789

ARTICLE III - CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 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: SummerPort Capital, LLC

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

Allan E. Keen
NAME
121 Garfield Avenue
Florida street address (P.O. Box **NOT** Acceptable)
Winter Park, Florida 32789
City, State and Zip

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TALLAHASSEE, FLORIDA

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.

Signature

ARTICLE IV - DURATION

The period of duration for the Company shall be **Perpetual** unless terminated as provided in the Operating Agreement.

ARTICLE V - MANAGEMENT

The Company is to be managed by a Manager and the name and address of the Manager is:

Allan E. Keen
121 Garfield Avenue
Winter Park, Florida 32789

ARTICLE VI - ADMISSION OF ADDITIONAL MEMBERS

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be as provided in the Operating Agreement.

(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)

A. E. Keen

Signature of a member or authorized Representative of a member

ALLAN E. KEEN

Typed or Printed Name of Signee

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