

Mark W. Friedman, LLC

Certified Public Accountant

Hays House  
48 Avenue D

Post Office Box 789  
Apalachicola, Florida 32329

Telephone: 850-653-1090  
Facsimile: 850-653-1091  
Email: markcpa@gtcom.net

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Registration Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

100003102031--5  
-01/19/00--01016--003  
\*\*\*\*125.00 \*\*\*\*125.00

To Whom It May Concern:

Please find enclosed the Articles of Organization and Certificate of Designation of Registered Agent/Registered Office for Mark W. Friedman, LLC, along with the filing fees of \$100.00 and \$25.00.

Sincerely,

*Mark W. Friedman*

Mark W. Friedman

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00 JAN 19 PM 1:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Member

American Institute of Certified Public Accountants  
Florida Institute of Certified Public Accountants

## ARTICLES OF ORGANIZATION

### ARTICLE I – Name:

The name of the Limited Liability Company is:

Mark W. Friedman, LLC

### ARTICLE II – Address:

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

Mailing Address

P.O. Box 789

Apalachicola, FL 32329

Street Address

48 Avenue D

Apalachicola, FL 32320

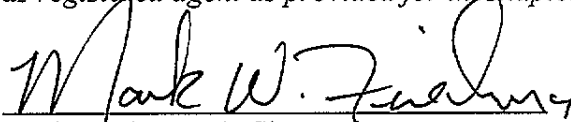
### ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:

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

Name: Mark W. Friedman, CPA

Address: 211 Avenue G  
Apalachicola, FL 32320

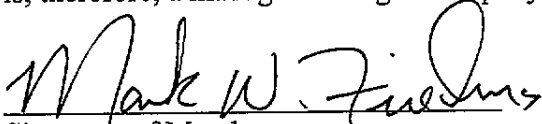
*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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 as provided for in Chapter 608, F. S..*

  
Registered Agent's Signature

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**ARTICLE IV – Management**

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company.

  
Signature of Member

(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.)

Mark W. Friedman  
Name of Signee

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TALLAHASSEE, FLORIDA

**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.

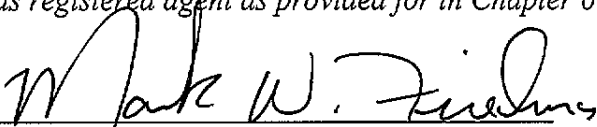
1. The name of the Limited Liability Company is:

Mark W. Friedman, LLC

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

Mark W. Friedman, CPA  
211 Avenue G  
Apalachicola, FL 32320

*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 m duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F. S..*

  
Signature

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