Division of Corporations

Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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(((H01000005706 6)))

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Division of Corporations

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Account Name : HENDERSON, FRANKLIN, STARNES & HOLT, P.A.

Account Number : 075410002172

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LIMITED LIABILITY COMPANY

Fantacia, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
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ARTICLES OF ORGANIZATION OF FANTACIA, LLC

ARTICLE I, - NAME

The name of the limited liability company shall be FANTACIA, LLC (the "Company

ARTICLE II - MAILING ADDRESS AND STREET ADDRESS

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

497 Webbs Cove Osprey, FL 34229

ARTICLE III. - INITIAL REGISTERED AGENT AND OFFICE

The name and street address of the initial registered agent of the Company is:

Name___

Address

Ronald John Heromin, M.D.

497 Webbs Cove Osprey, FL 34229

ARTICLE IV. - PURPOSE

The Company shall have unlimited power to engage in and do any lawful act concerning any or all lawful businesses for which limited liability companies may be organized according to the laws of the State of Florida, including all powers and purposes now and hereafter permitted by law to a limited liability company.

ARTICLE V. - MEMBERSHIP INTEREST

The Operating Agreement of the Company shall provide that a member's interest in the Company shall be evidenced by a Certificate of Membership Interest issued by the Company, and the Company shall maintain a registry of those certificates.

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ARTICLE VI. - MANAGEMENT OF THE COMPANY

Management of the Company is reserved to the Members, and each Member shall act as a Managing Member. The name and address of the Initial Managing Member is:

Ronald John Heromin, M.D.

<u> ARTICLE VIL - OPERATING AGREEMENT</u>

The Members shall have the power to adopt, alter, amend, or repeal the Operating Agreement of the Company containing provisions for the regulation and management of the affairs of the Company.

IN WITNESS WHEREOF, the undersigned, being the original Member of the Company, has executed these Articles of Organization, this 10th day of JANUARY

Ronald John Heromin, M.D., Sole Member

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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 IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: FANTACIA, LLC
- 2. The name and address of the registered agent and office is:

Ronald John Heromin, M.D. 497 Webbs Cove Osprey, FL 34229

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.

Ronald John Heromin, M.D., Registered Agent