

MAR-12-2001 10:31

P.01

6010000003764

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

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.

((H01000025811 0)))

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) 922-4003

From: Account Name : GRAHAM, CLARK, JONES, BUILDER, PRATT & MARKS
Account Number : I19990000278
Phone : (407) 647-4455
Fax Number : (407) 740-7063

LIMITED LIABILITY COMPANY

OPEN SKY TRAPEZE, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing

Public Access Help

FILED
01 MAR 12 PM 4:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
01 MAR 12 PM 12:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

((H01000025811 0)))

**ARTICLES OF ORGANIZATION
OF
OPEN SKY TRAPEZE, LLC**

FILED
01 MAR 12 PM 4:02
TALLAHASSEE, FLORIDA

The undersigned, desiring to form a limited liability company under and pursuant to Chapter 608, *Florida Statutes*, does hereby certify as follows:

**ARTICLE I
NAME**

The name of the limited liability company is OPEN SKY TRAPEZE, LLC (the "Company").

**ARTICLE II
ADDRESS**

The mailing address and street address of the principal office of the Company is 8615 Florida Rock Road, Orlando, Florida 32824.

**ARTICLE III
MANAGEMENT**

The Company will be member-managed. The initial Manager (the "Manager") of the Company will be Jillian Fraser, 8615 Florida Rock Road, Orlando, Florida 32824.

**ARTICLE IV
INITIAL REGISTERED OFFICE AND AGENT**

The street address of the initial registered office of the Company is 369 N. New York Avenue, Winter Park, Florida 32789, and the name of the initial registered agent of the Company at that address is James R. Pratt.

IN WITNESS WHEREOF, I have hereunto subscribed my name as of the 12th day of March, 2001.


James R. Pratt
Authorized Representative

((H01000025811 0)))

((H01000025811 0)))

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

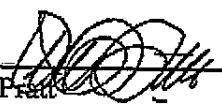
Pursuant to the provisions of Section 608.415 or 608.507, *Florida Statutes*, the undersigned limited liability company submits the following statement to designate a registered office and registered agent in the State of Florida.

1. The name of the limited liability company is: OPEN SKY TRAPEZE, LLC
2. The name and the Florida street address of the registered agent and office:

James R. Pratt
c/o Graham, Builder, Jones, Pratt & Marks, LLP
369 N. New York Avenue, 3rd Floor
Winter Park, Florida 32789


James R. Pratt
Authorized Representative

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.


James R. Pratt
Registered Agent

Date: March 12, 2001

((H01000025811 0)))