

Division of Corporations

**L01000007253**

**Florida Department of State  
Division of Corporations  
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**To:**  
Division of Corporations  
Fax Number : (850) 205-0383

**From:**  
Account Name : DEAN AND DEAN, LLP  
Account Number : I19980000091  
Phone : (352) 368-2800  
Fax Number : (352) 867-5787

**LIMITED LIABILITY COMPANY  
LAND & EQUIPMENT PARTNERS, LLC**

Certificate of Status	1
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Estimated Charge	\$160.00

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**ARTICLES OF ORGANIZATION  
OF  
LAND & EQUIPMENT PARTNERS, LLC**

**ARTICLE I**

**Name:**      The name of the Limited Liability Company:  
  
Land & Equipment Partners, LLC

**ARTICLE II**

**Address:**      The mailing address and street address of the principal office of the LLC is:  
  
4070 S.E. Maricamp Road  
Ocala, Florida 34471-6319

**ARTICLE III**

**Registered Agent:**      The name and street address of the registered agent:  
  
Lee Brown  
4070 S.E. Maricamp Road  
Ocala, Florida 34471-6319

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, Florida Statutes.

  
\_\_\_\_\_  
Lee Brown

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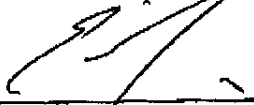
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ARTICLE IV

Management: The LLC is a manager-managed company.

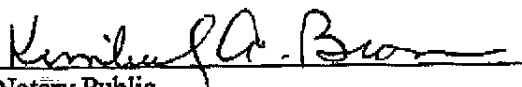
In accordance with Section 608.408 (3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Authorized Representative:

  
\_\_\_\_\_  
Lee Brown

STATE OF FLORIDA  
COUNTY OF MARION

Sworn to and subscribed before me this 8<sup>th</sup> day of May, 2001, by Lee Brown who is personally known to me.

  
\_\_\_\_\_  
Notary Public  
My commission expires on:

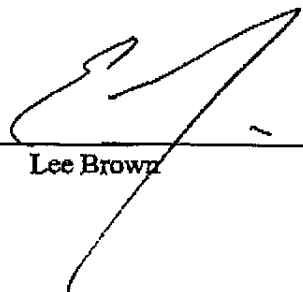


Kimberly A. Brown  
MY COMMISSION # CC833754 EXPIRES  
August 18, 2003  
BONDED THRU TROY FAIN INSURANCE, INC.

CERTIFICATE OF ACCEPTANCE OF REGISTERED AGENT

Having been designated as the Registered Agent for **LAND & EQUIPMENT PARTNERS, LLC**, I hereby accept the designation and agree to act as the Registered Agent of said company.

Dated: May 8, 2001

  
\_\_\_\_\_  
By: Lee Brown

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