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K. Bruce & Susan W. Jones  
88 South Bishop Street  
Santa Rosa Beach, Florida 32459

MJH

850 267-3667

May 9, 2001

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

(5/14)

600004216756--3  
-05/15/01--01016--015  
\*\*\*\*130.00 \*\*\*\*130.00

Dear Registration Section:

Enclosed is my application for ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY. I may be reached in the daytime at the number above, or at 770 955-0409. My check in the amount of \$130.00 is enclosed to cover the Filing Fee, the Designation of Registered Agent and the Certificate of Status.

Thank you,

K. Bruce Jones  
K. Bruce Jones

FILED  
01 MAY 14 AM 11:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is: SILVER CHALICE, LLC

## ARTICLE II - Address:

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

88 SOUTH BISHOP RD.  
SANTA ROSA BEACH,  
FL 32459

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

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

K. BRUCE JONES  
Name  
SAME AS ABOVE  
Florida street address (P.O. Box NOT acceptable)  
FL  
City, State, and Zip

*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..*

K. Bruce Jones  
Registered Agent's Signature

## Article IV - Management (Check box if applicable.)

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

(An additional article must be added if an effective date is requested)

K. Bruce Jones  
Signature of a member or an authorized representative of a member.

(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.)

K. BRUCE JONES  
Typed or printed name of signee

### Filing Fees:

\$100.00 Filing Fee for Articles of Organization  
\$ 25.00 Designation of Registered Agent  
\$ 30.00 Certified Copy (Optional)  
\$ 5.00 Certificate of Status (Optional)

FILED  
01 MAY 14 AM 11:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA