

L010000008343

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

From:
Account Name : BUSINESS FILINGS
Account Number : 105256001620
Phone : (608)827-5300
Fax Number : (608)827-5501

LIMITED LIABILITY COMPANY

Acorn Exchange, LLC

Certificate of Status	1
Certified Copy	0
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RECEIVED
01 MAY 24 PM 3:44
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

FILED
01 MAY 24 PM 4:00
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FAX AUDIT # 4010000688696

**ARTICLES OF ORGANIZATION
OF
Acorn Exchange, LLC**

ARTICLE I NAME

The name of the limited liability company shall be: **Acorn Exchange, LLC**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 1836 Woodberry Circle, Melbourne, Florida 32935.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Business Filings Incorporated, 1000 West Avenue, Suite 1114, Miami Beach, Florida 33139. Located in the County of Miami-Dade.

ARTICLE IV DURATION

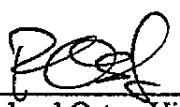
The duration for the limited liability company shall be: 12/31/2041.

ARTICLE V MANAGERS

The management of the limited liability company is reserved for the Managers and the names and addresses of the managers of the Limited Liability Company are:

Lynn Eichin, 1836 Woodberry Circle, Melbourne, Florida 32935

John Eichin, 1836 Woodberry Circle, Melbourne, Florida 32935


Richard Oster, Vice President, Business Filings Incorporated.
Prepared by Richard Oster, Business Filings Incorporated, 8025 Excelsior Dr. Suite 200,
Madison, WI 53717.
(608) 827-5300.

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FAX AUDIT # 4010000688696CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES,
THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE
STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN
DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE
STATE OF FLORIDA.

The name of the limited liability company is: **Acorn Exchange, LLC**

The name and address of the registered agent and office is Business Filings Incorporated,
1000 West Avenue, Suite 1114, Miami Beach, Florida 33139. Located in the County of
Miami-Dade.

Having been named as registered agent and to accept service of process for the above
stated corporation 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.

Signature: _____


Richard Oster – Vice President
Business Filings Incorporated

Date: May 24, 2001

FILED
01 MAY 24 PM 1:00
CLERK OF STATE
TALLAHASSEE, FLORIDA

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