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STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

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LIMITED LIABILITY COMPANY

NEWLYNN ASSOCIATES, LLC

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA  
01 JUN -5 PM 1:56

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**ARTICLES OF ORGANIZATION  
OF  
NEWLYNN ASSOCIATES, LLC**

SECRETARY  
TALLAHASSEE, FLORIDA

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The undersigned does hereby subscribe to, acknowledge and file the following Articles of Organization for the purpose of creating a limited liability company under the laws of the State of Florida.

**ARTICLE I**

The name of this limited liability company shall be: **NEWLYNN ASSOCIATES, LLC.**

**ARTICLE II**

The mailing address and street address of the principal office of the limited liability company shall be 3236 NW 61<sup>st</sup> Street, Boca Raton, Florida 33496, with the privilege of having its offices and branch offices at other places within or without the State of Florida.

**ARTICLE III**

The initial registered office of this limited liability company is 3236 NW 61<sup>st</sup> Street, Boca Raton, Florida 33496. The initial registered agent at that address is Karen Newman.

**ARTICLE IV**

The limited liability company will be a manager-managed company.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 5<sup>th</sup> day of June, 2001.

  
Karen Newman, 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.

FIRST -- The name of the limited liability company is NEWLYNN ASSOCIATES, LLC.

SECOND -- The name and address of the registered agent and office is:

Karen Newman  
3236 NW 61<sup>st</sup> Street  
Boca Raton, Florida 33496

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.

Dated this 5<sup>th</sup> day of June, 2001.

  
\_\_\_\_\_  
Karen Newman, Registered Agent

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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