



L010000013011

ACCOUNT NO. : 072100000032

REFERENCE : 304742 7280375

AUTHORIZATION :

Patricia Pizute

COST LIMIT : \$ 125.00

ORDER DATE : July 29, 2001

ORDER TIME : 9:37 AM

ORDER NO. : 304742-001

CUSTOMER NO: 7280375

CUSTOMER: Mr. Michael D. Heckman
Mr. Michael D. Heckman

830-13 Ala North
#342
Ponte Vedra Bea, FL 32082

DOMESTIC FILING

NAME: ADVANCED CAPITAL LLC

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2001 AUG -6 PM 12: 13
NOT INTENDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

EFFECTIVE DATE:

XX ARTICLES OF ORGANIZATION

800004519008--1

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Norma Hull - EXT. 1115

EXAMINER'S INITIALS:

JB
8601

APPROVED
AND
FILED
01 AUG -6 PM 1:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ADVANCED CAPITAL LLC

ARTICLE II - Address:

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

830-13 A1A NORTH, #342, PONTE VEDRA BEACH, FLORIDA 32082

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

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

MICHAEL D. HECKMAN
Name
830-13 A1A NORTH, #342
Florida street address (P.O. Box NOT acceptable)
PONTE VEDRA FL 32082
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..

MICHAEL D. HECKMAN

By: see attached

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)

Laura R. Dunlap
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.)

LAURA R. DUNLAP

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)

APPROVED
AND
FILED
01 AUG - 6 PM 1:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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:

Advanced Capital LLC

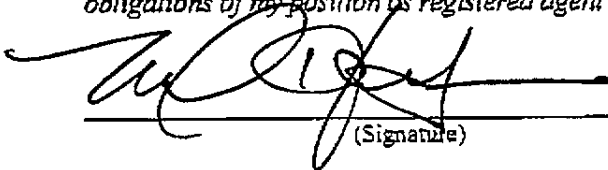
2. The name and the Florida street address of the registered agent and office are:

Michael D. Heckman
(Name)

830-13 A1A North #342
Florida street address (P.O. Box **NOT** ACCEPTABLE)

Ponte Vedra Beach, FL 32082
City/State/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..


(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

APPROVED
AND
FILED
01 AUG -6 PM 1:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MANAGING MEMBERS OF:

ADVANCED CAPITAL LLC

Michael D. Heckman
Managing Member

13703 Richmond Park Drive North, #3403
Jacksonville, Florida 32224

Rose Anne Heckman
Managing Member

13703 Richmond Park Drive North, #3403
Jacksonville, Florida 32224

APPROVED
AND
FILED

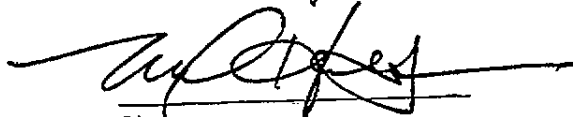
01 AUG -6 PM 1:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED POWER OF ATTORNEY


The undersigned hereby designates Corporation Service Company ("CSC"), a Delaware corporation qualified to do business in the State of Florida, as its attorney-in-fact for the limited purpose of executing on behalf of the undersigned the original Articles of Organization of ADVANCED CAPITAL LLC (the "LLC"), a Florida limited liability company, for the further purpose of filing such Articles of Organization with the State of Florida Department of State, and for no other purpose. The power granted hereby shall be exercisable and effective upon execution of the Limited Power of Attorney by the undersigned and upon delivery of the original or a copy thereof by facsimile or other means to CSC. This grant of power shall be revoked immediately after the filing of the Articles of Organization of the LLC with the State of Florida Department of State. All parties who review the original or a copy of this Limited Power of Attorney may rely upon it and the exercise of the limited power granted herein without making further inquiry as to the matters described herein or the authority of CSC to act hereunder.

This Limited Power of Attorney is executed on this 5th day of August, 2001.


Signature

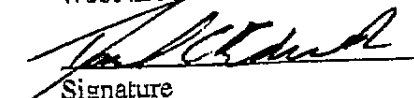
Michael Heckman
Print Name of Signer

WITNESS:


Signature

Rose Anne Heckman
Print Name of Witness

WITNESS:


Signature

Daniel C. Edwards
Print Name of Witness

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 AUG -6 PM 1:06

APPROVED
AND
FILED