

CCRS  
103 N. MERIDIAN STREET, LOWER LEVEL  
TALLAHASSEE, FL 32301  
222-1173

FILING COVER SHEET  
ACCT. #FCA-14

L01000013730

CONTACT: CINDY HICKS

DATE: 8-16-01

REF. #: 0174.1375

CORP. NAME: BRADEN RIVER EQUINE, L.L.C.

01 AUG 16 AM 10:59  
SECRETARY OF STATE  
TALLAHASSEE, FL 32301

APPLICANT  
AND  
FILED

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION   | <input type="checkbox"/> ARTICLES OF AMENDMENT  | <input type="checkbox"/> ARTICLES OF DISSOLUTION      |
| <input type="checkbox"/> ANNUAL REPORT               | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME              |
| <input type="checkbox"/> FOREIGN QUALIFICATION       | <input type="checkbox"/> LIMITED PARTNERSHIP    | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT               | <input type="checkbox"/> MERGER                 | <input type="checkbox"/> WITHDRAWAL                   |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | <input type="checkbox"/> UCC-1                  | <input type="checkbox"/> UCC-3                        |
| <input type="checkbox"/> OTHER: _____                |   |   |

400004538114--8  
-08/16/01--01039--003  
\*\*\*\*155.00 \*\*\*\*155.00

STATE FEES PREPAID WITH CHECK# \_\_\_\_\_ FOR \$ 155.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

\_\_\_\_\_ COST LIMIT: \$ \_\_\_\_\_

PLEASE RETURN:

- |  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS     |   |   |

Examiner's Initials

RECEIVED  
DIVISION OF CORPORATIONS  
DEPARTMENT OF STATE  
2001 AUG 16 AM 10:20  
NOT RETURNED  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

10-21-01  
8-16-01

# ARTICLES OF ORGANIZATION

BRADEN RIVER EQUINE, L.L.C.,  
a Florida limited liability company

## ARTICLE I NAME

The business and affairs of the Limited Liability Company shall be conducted under the name of:

BRADEN RIVER EQUINE, L.L.C.

## ARTICLE II PRINCIPAL OFFICE

The street address and the mailing address of the principal place of business of the Limited Liability Company within the State of Florida shall be:

8231-B Coash Road  
Sarasota, Florida 34241

## ARTICLE III INITIAL REGISTERED AGENT/OFFICE

The registered office of the Limited Liability Company and its initial registered agent shall be:

Kenneth D. Doerr

240 South Pineapple Avenue  
10th Floor  
Sarasota, Florida 34236

## ARTICLE IV MANAGEMENT AND POWERS

The business and affairs of the Limited Liability Company shall be managed by one or more Managers elected as provided in the Regulations of the Limited Liability Company.

01 AUG 16 AM 10:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

IN WITNESS WHEREOF, these Articles of Organization have been executed as of the  
15<sup>th</sup> day of August, 2001.

WITNESSES:

*Jack M. Maag*  
Print Name JACK M. MAAG

*Tina L. Haynes*  
Print Name TINA L. HAYNES

*Kenneth D. Doerr*  
Kenneth D. Doerr

"AUTHORIZED REPRESENTATIVE"

APPROVED  
AND  
FILED  
01 AUG 16 AM 10:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 608.415 of the 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:

BRADEN RIVER EQUINE, L.L.C.

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

Kenneth D. Doerr  
240 South Pineapple Avenue  
10th Floor  
Sarasota, Florida 34236

Having been named 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Date:

8/15/01

*Kenneth D. Doerr*  
Kenneth D. Doerr

"REGISTERED AGENT"

APPROVED  
AND  
FILED  
01 AUG 16 AM 10:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA