

CORPORATE  
ACCESS,  
INC.

**LO100005401**

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

WALK IN

PICK UP

9/10/01



✓ CERTIFIED COPY

✓ CUS CAS

PHOTO COPY

✓ FILING LLC

1.) FOG Boyette, L.L.C.  
(CORPORATE NAME & DOCUMENT #)

2.) \_\_\_\_\_  
(CORPORATE NAME & DOCUMENT #)

3.) \_\_\_\_\_  
(CORPORATE NAME & DOCUMENT #)

4.) \_\_\_\_\_  
(CORPORATE NAME & DOCUMENT #)

5.) \_\_\_\_\_  
(CORPORATE NAME & DOCUMENT #)

APPROVE  
AND  
FILE  
01 SEP 10 AM 10:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
2001 SEP 10 AM 10:04  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

100004577481--6  
-03/10/01--01034--020  
\*\*\*\*160.00 \*\*\*\*160.00

SPECIAL INSTRUCTIONS

8-10-01

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

**FOG Boyette, L.L.C.**

## ARTICLE II - Address:

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

**1745 W. Fletcher  
Tampa, FL 33612**

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

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

Michael P. Rice

Name

1745 W. Fletcher Avenue

Florida street address (P.O. Box **NOT** acceptable)

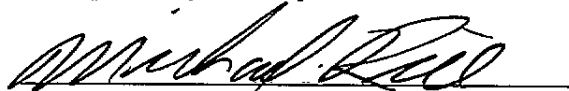
Tampa,

FL

33612

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.*

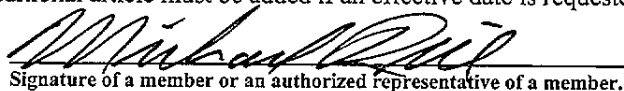


Registered Agent's Signature

## 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)



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.)

Michael P. Rice

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 SEP 10 AM 10:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA