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RICKEY L. FARRELL, ATTORNEY AT LAW, P.A.

1595 SE PORT ST., LUCIE BOULEVARD

PORT ST. LUCIE, FLORIDA 34952

(561) 335-5455

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October 9, 2001

State of Florida  
Secretary of State  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

10/12

RE: MCDOPL, LLC

500004634865--7

-10/12/01--01054--011

\*\*\*\*125.00 \*\*\*\*~~7.00~~ 125.00 sc

Dear Sir or Madam:

Enclosed herewith is an original and one copy of the Articles of Organization and Affidavit of contribution by the members for the above-referenced corporation, together with the acceptance by Registered Agent. Please file the original in your offices and certify and return to us a certified copy.

I am enclosing a check in the amount of \$125.00, which covers the filing fees, certified copy fees and the registered agent designation fees. Thank you for your cooperation in this matter.

Sincerely,



Tiffany N. Gonsalves

Enc.

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01 OCT 12 PM 4:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## **ARTICLES OF ORGANIZATION**

**OF**

**MCDOPL, LLC.**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Chapter 608, Florida Statutes, hereby make, acknowledge, and file the following Articles of Organization:

### **ARTICLE I - NAME**

The name of this limited liability company is MCDOPL, LLC.

### **ARTICLE II - DURATION**

This limited liability company shall have perpetual existence commencing on the date of this filing of these Articles with the Department of State.

### **ARTICLE III - ADDRESS**

The mailing address and street address of the principal office of the Company shall be 1595 S.E. Port St. Lucie Boulevard, Port St. Lucie, Florida 34952.

### **ARTICLE IV - MANAGEMENT**

Management of the Company shall be reserved to the Members. The Managing Member shall be Melissa McDowell.

### **ARTICLE V - ADDITIONAL MEMBERS**

Members shall have the right to admit additional members from time to time on such terms and conditions as the Members shall deem advisable and acceptable.


### **ARTICLE VI - SURVIVORSHIP**

In the event any Member or Members shall die, resign, retire, be expelled, be adjudicated bankrupt, or upon the occurrence of any other event which terminates the continued membership of a Member in the Company, the remaining Members shall have the right to continue the business.

### **ARTICLE VI - REGISTERED AGENT**

The street address of the initial registered agent of the Company is Rickey L. Farrell, 1595 SE Port St. Lucie Boulevard, Port St. Lucie, Florida 34952.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

  
MELISSA McDOWELL  
Member

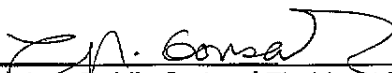
**STATE OF FLORIDA  
COUNTY OF ST. LUCIE**

**BEFORE ME**, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared Melissa McDowell, who has produced DRIVERS LICENSE as identification or who is personally known to me and who executed the foregoing Articles of Organization, and he acknowledged before me that he executed the Articles of Organization.

**IN WITNESS WHEREOF**, I have set my hand and seal in the State and County above, this 4th day of October, 2001.



(SEAL)  
Tiffany N. Gonsalves  
MY COMMISSION # CC885674 EXPIRES  
November 7, 2003  
BONDED THRU TROY FAIR INSURANCE, INC.

  
Notary Public State of Florida at Large  
Printed Signature: T.N. GONSAVES  
My Commission No:  
My Commission Expires:

**ACCEPTANCE BY REGISTERED AGENT**

Having been named as Registered Agent to accept service of process for the above named company, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper performance of my duties. I am familiar with and accept the obligations of such position.

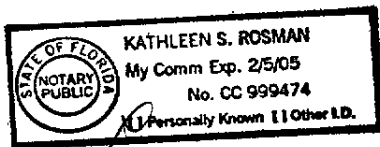
  
RICKEY L. FARRELL  
Registered Agent

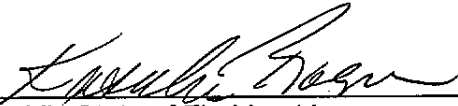
**STATE OF FLORIDA  
COUNTY OF ST. LUCIE**

**BEFORE ME**, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared Rickey L. Farrell, who has produced \_\_\_\_\_ as identification or who is personally known to me and who executed the foregoing Articles of Organization, and he acknowledged before me that he executed the Articles of Organization.

IN WITNESS WHEREOF, I have set my hand and seal in the State and County above,  
this 9<sup>th</sup> day of October, 2001.

(S E A L)



  
\_\_\_\_\_  
Notary Public State of Florida at Large  
Printed Signature:  
My Commission No:  
My Commission Expires: