

CORPDIRECT AGENTS, INC. (formerly CCRS)  
103 N. MERIDIAN STREET, LOWER LEVEL  
TALLAHASSEE, FL 32301  
222-1173

FILING COVER SHEET  
ACCT. #FCA-14

L010000019838

CONTACT: CINDY HICKS

DATE: 11-15-01

REF. #: 0242.3279

CORP. NAME: OPTION L.L.C.

- |  |   |   |
|--|---|---|
| <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: _____                |   |   |

APPROVED  
AND  
FILED  
01 NOV 16 AM RECEIVED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA 32301  
11/16/01 10:09 AM  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

STATE FEES PREPAID WITH CHECK# 500712 FOR \$ 125.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

COST LIMIT: \$

PLEASE RETURN:

- ☐ CERTIFIED COPY      ☐ CERTIFICATE OF GOOD STANDING  
☐ CERTIFICATE OF STATUS

200004684912--9  
-11/16/01--01010--015  
\*\*\*\*125.00 \*\*\*\*125.00  
☒ PLAIN STAMPED COPY  
11-16-01

Examiner's Initials

**ARTICLES OF ORGANIZATION FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - NAME**

The name of the Limited Liability Company is: **OPTIONS, LLC.**

**ARTICLE II - ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is: 4221 Northeast 30<sup>th</sup> Terrace, Lighthouse Point, Florida 33064.

**ARTICLE III - MANAGEMENT**

The Limited Liability Company is to be managed by a member, and the name and address of the managing member is:

JAMES E. CONLAN  
4221 Northeast 30<sup>th</sup> Terrace  
Lighthouse Point, Florida 33064

**ARTICLE IV - REGISTERED AGENT AND OFFICE**

The name of the company's registered agent is J. PATRICK DYAL, and the address of the registered office is 4221 Northeast 30<sup>th</sup> Terrace, Lighthouse Point, Florida 33064. The Consent to Appointment as Registered Agent is included with these Articles.

DATED this 15 day of Nov, 2001.

  
\_\_\_\_\_  
JAMES E. CONLAN

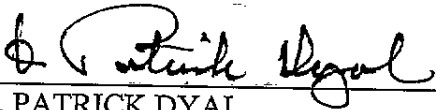
CLERK OF STATE  
TALLAHASSEE, FLORIDA

NOV 16 AM 10:31

APPROVED  
AND  
FILED

## CONSENT TO APPOINTMENT AS REGISTERED AGENT

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.

  
J. PATRICK DYAL

Date: November 15, 2001

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AND  
FILED  
01 NOV 16 AM 10:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA