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CORPORATION	NAME(S) & DOCU	MENT NUMBER(S), (if	Office Use Only
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3	rporation Name)	(Document #)	ED PM 2: 32 OF STATE E. FLORIDA
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NEW FILINGS Profit Not for Profit Limited Liabi Domestication Other	lity	AMENDMENTS Amendment Resignation of R.A Change of Register Dissolution/Withd Merger	A., Officer/Director red Agent rawal
OTHER FILING Annual Repor Fictitious Nan	<u> </u>	REGISTRATION/QU Foreign Limited Partnershi Reinstatement Trademark Other	
CR2E031(7/97)		<u>#</u> -	Examiner's Initials

FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

December 14, 2001

GREENFIELD 241 MEADOW BEAUTY TERRACE SANFORD, FL 32771

SUBJECT: SCOTT GREENFIELD AGENCY, LLC

Ref. Number: W01000028643

We have received your document for SCOTT GREENFIELD AGENCY, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Document Specialist

Letter Number: 401A00065814

Division of Corporations - P.O. BOX 6397 Tollohorman Film 1, 2001

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

in the second
ARTICLE I - Name: The name of the Limited Liability Company is: ScoW GREENFIELD AGENCY, LLC
SCOM GREENFIELD MODEL
ARTICLE II - Address:
A = A + A + A + A + A + A + A + A + A +
ORANGE CITY, FL 327L3 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature
The name and the Florida street address of the registered agent are:
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Name Name TERRACE Name Name
Piorida street address (P.O. Box NOT acceptable)
Fiorida street address (P.O. Box NOT acceptable)
SANFORD FL 3277/ 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.)
Scott GREENfield
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)