



L02000005107

ACCOUNT NO. : 072100000032

REFERENCE : 421906 8872A

AUTHORIZATION :

Patricia Pigute

COST LIMIT : \$ 155.00

ORDER DATE : February 28, 2002

ORDER TIME : 1:56 PM

ORDER NO. : 421906-005

CUSTOMER NO: 8872A

CUSTOMER: Ms. Debbi Sanders
Robert J. Kelly, P.a.

000005042470--4

Post Office Box 1056

Dunedin, FL 34697

DOMESTIC FILING

NAME: ELITECORP PHOENIX FUND, LLC

EFFECTIVE DATE:

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

CONTACT PERSON: Norma Hull - EXT. 1115

EXAMINER'S INITIALS:

APPROVED
AND
FILED

02 MAR -4 AM 8:33

RECEIVED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
02 MAR -4 PM 4:23

DEPARTMENT OF STATE
DIVISION OF CORPORATE AFFAIRS
TALLAHASSEE, FLORIDA

JB
3-5-02

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ELITECORP PHOENIX FUND, LLC

ARTICLE II - Address:

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

4500 140TH AVENUE NORTH, SUITE 101, CLEARWATER, FL 33762

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

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

ROBERT J. KELLY, ESQUIRE

Name

605 PALM BOULEVARD

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

DUNEDIN, FL 34697

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.

ROBERT J. KELLY, ESQUIRE

By: see attached

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 therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Deborah D. Skipper

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.)

DEBORAH D. SKIPPER

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)

02 MAR -4 AM 8:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

ACCEPTANCE OF REGISTERED AGENT
DESIGNATED IN THE ARTICLES OF ORGANIZATION

Robert J. Kelly, Esquire, an individual residing in this state, having a business office at 605 Palm Boulevard, Dunedin, Florida 34697 and having been designated as the Registered Agent in the above and foregoing Articles of Organization of:

ELITECORP PHOENIX FUND, LLC

Robert J. Kelly, Esquire is familiar with and accepts the obligations of the position of Registered Agent under Section 608, Florida Statutes.

By: 

Typed Name: Robert J. Kelly, Esquire

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

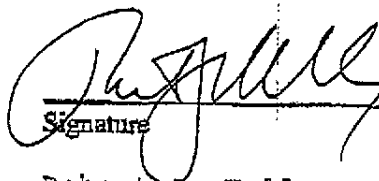
02 MAR -4 AM 8:33

APPROVED
AND
FILED

LIMITED POWER OF ATTORNEY

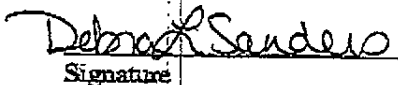
The undersigned hereby designates Corporation Service Company ("CSC"), a Delaware corporation qualified to do business in the State of Florida, as its attorney-in-fact for the limited purpose of executing on behalf of the undersigned the original Articles of Organization of ELITECORP PHOENIX FUND, LLC (the "LLC"), a Florida limited liability company, for the further purpose of filing such Articles of Organization with the State of Florida Department of State, and for no other purpose. The power granted hereby shall be exercisable and effective upon execution of the Limited Power of Attorney by the undersigned and upon delivery of the original or a copy thereof by facsimile or other means to CSC. This grant of power shall be revoked immediately after the filing of the Articles of Organization of the LLC with the State of Florida Department of State. All parties who review the original or a copy of this Limited Power of Attorney may rely upon it and the exercise of the limited power granted herein without making further inquiry as to the matters described herein or the authority of CSC to act hereunder.

This Limited Power of Attorney is executed on this 4th day of March, 2002.


Signature

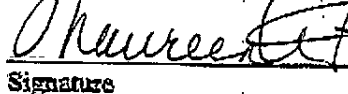
Robert J. Kelly
Print Name of Signer

WITNESS:


Signature

Debra L. Sanders
Print Name of Witness

WITNESS:


Signature

Maureen A. Powell
Print Name of Witness

02 MAR 14 AM 8:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED