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Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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From:

Account Name : ANSBACHER & SCHNEIDER, PA

Account Number : 072647001172 z (904)296-0100 Fax Number : (904)296-2842 w02/10432

LIMITED LIABILITY COMPANY

LOUDON, L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

April 12, 2002

ANSBACHER & SCHNEIDER, PA

SUBJECT: LOUDON, L.L.C.

REF: W02000010432

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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

The registered agent must sign accepting the designation.

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) 245-6967.

Michelle Hodges Document Specialist FAX Aud. #: H02000082984 Letter Number: 002A00021975

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

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ARTICLES OF ORGANIZATION OF LOUDON, L.L.C.

ARTICLE I

The name of this Limited Liability Company shall be Loudon, L.L.C., a limited liability company.

ARTICLE II

Loudon, L.L.C. shall have perpetual existence.

ARTICLE III

Loudon, L.L.C. is created to engage in any lawful act, business or activity for which limited liability companies may be formed under the laws of the State of Florida and to do any and all other things which are necessary, desirable or incidental to the foregoing purpose.

ARTICLE IV

The principal place of business of Loudon, L.L.C. shall be 5150 Belfort Road, Building 100, Jacksonville, Florida 32256 and the mailing address shall be P.O. Box 551260, Jacksonville, Florida 32255 and such other place or places as the Member from time to time may determine.

The initial registered agent of Loudon, L.L.C. shall be Michael N. Schneider whose address is 5150 Belfort Road, Building 100, Jacksonville, Florida, 32256.

<u>ARTICLE V</u>

Loudon, L.L.C. will be managed by its Members.

IN WITNESS WHEREOF, these Articles of Organization have been duly

executed.

Michael N. Schmeider Authorized Representative

020366

Michael N. Schneider Fl. Bar No. 166929 P.O. Box 551260 Jacksonville, FL 32255-1260 (904) 296-0100

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SECRETARY OF STATE
TALL AHASSEE FLORIDA

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned limited liability company submits the following statement in designating the registered office/registered agent, in the State of Florida.

The name of the organization is Loudon, L.L.C., a Limited Liability Company.

The name and address of the registered agent and office is:

Michael N. Schneider 5150 Belfort Road, Building 100 Jacksonville, FL 32256

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.

Michael N. Schneider, Registered Agent

April 12, 2002

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