ARtiful Rec	402000012277 juestor's Name	
130 JOHN [AllA-HASSE City/State/	KNOX KO, SE 2 Address E. F. 31303 386-8624 Zip Phone # Office Use Only 23 15	
\wedge	NAME(S) & DOCUMENT NUMBER(S), (if known): FIVE) EXCHAUGE / COMO) STORS, LLC Oration Name (Document #)	
3	oration Name) (Document #) Oration Name) (Document #)	
4.		- 13 0 .00
	Pick up time Certified Copy Will wait Photocopy Certificate of Status	
NEW FILINGS:	AMENDMENTS	*
Profit	Amendment	•
NonProfit	Resignation of R.A., Officer/ Director	
Limited Liability	Change of Registered Agent	
Domestication	Dissolution/Withdrawal	
Other	Merger STA	
OTHER FILINGS Annual Report	Dissolution/Withdrawal Merger REGISTRATION/ QUALIFICATION Foreign	
Fictitious Name		
Name Reservation	Limited Partnership	
	Reinstatement	
	Trademark	
	Other	

Examiner's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

PRINCETON (FIVE) EXCHANGE ACCOMODATORS, LLC

ARTICLE II - Address:

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

230 JOHN KNOX ROAD, SUITE TWO TALLAHASSEE, FL 32303

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

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

ARTHUR C. GAY	芸品	_ is _ is _ is
Name	経動	20
230 JOHN KNOX ROAD, SUITE TWO	$m_{\underline{\zeta}}$	**** 25
Florida street address (P.O. Box NOT acceptable) TALLAHASSEE FL 32303	FLOR FLOR	ΐο
City, State, and Zip	京司	2

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.)

ARTHUR C. GAY

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)