CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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Time

Date

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Signature

Name

Walk-In

Requested by:

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	Foreign Corp. File	-Z
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	Art. of Amend. File	
	RA Resignation	
	Dissolution / Withdrawal	
	Annual Report / Reinstatement	
	Cert. Copy	
	Photo Copy	·
	Certificate of Good Standing	
	Certificate of Status	
	Certificate of Fictitious Name	
	Corp Record Search	
	Officer Search	
	Fictitious Search	_
	Fictitious Owner Search	 -
	Vehicle Search	
	Driving Record	
	UCC 1 or 3 File	-
	UCC 11 Search	
	UCC 11 Retrieval	_
	Courier L REVAN	AUG 1 6 2002

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: BLITCHTON OF OCALA, LLC.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 3960 N.W. Blitchton Road, Ocala, Florida 34482.

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

The name and Florida street address of the registered agent are: JOHN SCHWAB Name
JOHN SCHWAB
Name 5000 0
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3960 N.W. Blitchton Road Florida street address (P.O. Box NOT acceptable)
Florida street address (1.0. Box 1101 deceptation)
Ocala, Florida, 34482
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 the 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.) [X] The Limited Liability Company is to be managed by one manger or more managers and is, therefore, a manager - managed company.
(An additional article must be added if an effective date is requested)
John Schwab
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.)
JOHN SCHWAB
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)