

CT CORPORATION SYSTEM

LO2000026015

CORPORATION

Franklin Assessments GP, L.L.C.

400008164844--2
-10/05/02-51005-002
****125.00 ****125.00

- | | | |
|---|---|---|
| <input type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> Nonprofit | | |
| <input type="checkbox"/> Foreign | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| | <input type="checkbox"/> Reinstatement | |
| <input checked="" type="checkbox"/> Limited Partnership
LLC | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| | <input type="checkbox"/> Name Registration | <input type="checkbox"/> Change of RA |
| | <input type="checkbox"/> Fictitious Name | <input type="checkbox"/> UCC |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Photocopies | <input type="checkbox"/> CUS |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out | | |

RECEIVED
02 OCT -2 PM 1:17
TALLAHASSEE, FLORIDA

Name _____
Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____

10/2/02

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660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

10/3 rest

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Franklin Assessments GP, L.L.C.

ARTICLE II - Address:

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

P.O. Box 999, 2 Pond's Edge Drive, Chadds Ford, PA 19317

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

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

Brandywine Financial Services Corporation
 Name
c/o Bruce E. Moore, 2631 McCormick Drive, Suite 101
 Florida street address (P.O. Box **NOT** acceptable)
Clearwater FL 33759
 City, State, and Zip

02 OCT -2 PM 1:17
 FILED
 CLERK OF CIRCUIT COURT
 IN AND FOR THE COUNTY OF HIGHLAND FLORIDA

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.

Brandywine Financial Services Corporation

 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.)

Bruce E. Moore, Managing Member
 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)