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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

## Rossway Moore & Taylor

ATTORNEYS AND COUNSELORS AT LAW

JOHN E. MOORE, III\*
BRADLEY W. ROSSWAY
JAMES A. TAYLOR, III\*
LISA R. HAMILTON
JULIANN N. HICKEY
THOMAS W. TIERNEY\*\*
MICHAEL J. SWAN
OF COUNSEL

THE OAK POINT PROFESSIONAL CENTER 5070 NORTH HIGHWAY A-1-A SUITE 200 VERO BEACH, FLORIDA 32963 December 27, 2002

TELEPHONE (772) 231-4440 FACSIMILE (772) 231-4430

"ALSO ADMITTED IN THE DISTRICT OF COLUMBIA ""ALSO ADMITTED IN CALIFORNIA

#### **VIA FEDERAL EXPRESS**

Florida Department of State ATTN: Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

RE: Former Affiliates, LLC

Dear Sir/Madam:

Enclosed please find Articles of Organization for the captioned entity or filing. Also enclosed is a check in the amount of \$125.00 representing the filing example and \$30.00 for one certified copy. Please return the certified copy in the envelope provided.

If you have any questions, please do not hesitate to contact me.

Sincerely,

Jes≰i¢a M. Beckner

Assistant to John E. Moore, III

Enclosures

cc: Joel D. Tippens

#### ARTICLES OF ORGANIZATION FOR FORMER AFFILIATES, LLC,

a Florida Limited Liability Company

### ARTICLE 1 Name

The name of the Limited Liability Company is:

FORMER AFFILIATES, LLC

## ARTICLE II Address

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

7825 SW Ellipse Way Stuart, Florida 34997

## ARTICLE III Registered Agent/Address

The name and address of the registered agent is:

Joe D. Tippens 7825 SW Ellipse Way Stuart, Florida 34997

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.

Signature

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#### **ARTICLE IV** Management

The Limited Liability Company is to be managed by a sole management member. That sole management member shall be Joel D. Tippens.

Dated:

Signature

Print Name:

Print Name: Joe D. Tipeens
Authorized Representative of the Members