

# L03000008925

(Requestor's Name)

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(Business Entity Name)

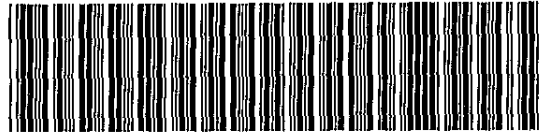
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EFFECTIVE DATE  
3/15/03

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DIVISION OF CORPORATION

effective date

**GRAYHARRIS**  
ATTORNEYS AT LAW

GRAY, HARRIS & ROBINSON, P.A.

SUITE 600  
301 SOUTH BRONOUGH ST. (3230  
P.O. BOX 11189  
TALLAHASSEE, FLORIDA 32302-31  
TEL 850-222-7717  
TEL 850-577-9090  
FAX 850-222-3494  
FAX 850-577-3311  
WEB grayharris.com

March 3, 2003

Division of Corporations  
George Firestone Building  
409 East Gaines Street  
Tallahassee, FL 32301

Via Hand Delivery

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

EFFECTIVE  
3/12/03

To Whom It May Concern:

Enclosed for filing, please find the **ARTICLES OF ORGANIZATION**, along with a check in the amount of **\$155.00** for the applicable filing fees and fees to obtain a **CERTIFIED COPY** of the **ARTICLES OF ORGANIZATION** for the following entity:

**THE DILLON KELLY COMPANY, INC.**

Upon receipt, please "date stamp" the copy of this letter provided, and call me at 222-7717, when the document is ready. Thank you for your assistance in this matter.

Very truly yours,

*Jill W. May*  
Jill W. May, Paralegal

/jwm  
Enclosures



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

March 4, 2003

JILL W. MAY  
GRAY HARRIS & ROBINSON  
P.O. BOX 11189  
TALLAHASSEE, FL 32302-3189

SUBJECT: THE DILLON KELLY COMPANY, LLC  
Ref. Number: W03000006209

We have received your document for THE DILLON KELLY COMPANY, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on March 3, 2003. Please amend your document accordingly.

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) 245-6913.

Diane Cushing  
Corporate Specialist

Letter Number: 703A00013666

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is: **THE DILLON KELLY COMPANY, LLC**

EFFECTIVE DATE  
3/12/07

### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:  
**2424 ORLANDO CENTRAL PARKWAY, ORLANDO, FL 32809**

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

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

**BRETT KELLY  
2424 ORLANDO CENTRAL PARKWAY  
ORLANDO, FL 32809**

*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, therefore, a manager - managed company.

### Article V - Effective Date:

The effective date of the formation of the Limited Liability Company shall be **3/12/2007**.

  
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.)

**BRETT KELLY, AUTHORIZED REPRESENTATIVE**

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)

