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April 29, 2003

# **CORPORATION NAME (S) AND DOCUMENT NUMBER (S):**

Knox Management Associates, LLC			
Filing Evidence	Type of Document		
	y		
☐ Certified Copy	☐ Certificate of Good Standing		
	☐ Articles Only		
Retrieval Request  Photocopy  Certified Copy	☐ All Charter Documents to Include Articles & Amendments ☐ Fictitious Name Certificate ☐ Other		
NEW FILINGS	AMENDMENTS  Amendment  Resignation of RA Officer/Director  Change of Registered Agent  AMENDMENTS  FILED  FOR 29 PM 2: 26		
Profit	Amendment SS 79 FI		
Non Profit	Resignation of RA Officer/Director		
X Limited Liability	Change of Registered Agent		
Domestication	Dissolution/Withdrawal		
Other	Merger		
OTHER FILINGS	REGISTRATION/QUALIFICATION		
Annual Reports	Foreign		
Fictitious Name	Limited Liability		
Name Reservation	Reinstatement		
Reinstatement	Trademark		

Other

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is: Knox Management Associates, LLC

#### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 3663 Crown Point Court, Jacksonville, Florida 32257

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

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

Lewis W. Harper, Esq	uire
	Name
76 South Laura Street	t, Suite 1700
Florida street addre	css (P.O. Box NOT acceptable)
Jacksonville	FL 32202
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 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.

(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.)

Knox Family, LLC by Alisa Knox, its Member-Manager

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)