

#### Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H03000298344 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : GRAY HARRIS ROBINSON LANE TROHN

Account Number : 120000000092 Phone : (863)284-2200 Fax Number : (863)688-0310

### LIMITED LIABILITY COMPANY

#### DUNSON ROAD, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

03 OCT 16 PH 4: 15

Electronic Filing Menu

Corporate Filing

Public Access Help

## (H03000298344 3) ARTICLES OF ORGANIZATION

OF

#### **DUNSON ROAD, LLC**

The undersigned hereby presents these Articles of Organization for the formation of a Limited Liability Company pursuant to the Florida Limited Liability Company Act.

#### **ARTICLE I**

#### NAME

The name of the Limited Liability Company is DUNSON ROAD, LLC.

#### ARTICLE II

#### PRINCIPAL OFFICE

The mailing address and the street address of the principal office of the Limited Liability

Company is 302 South Massachusetts Avenue, Suite 223, Lakeland, FL 33801.

#### ARTICLE III

#### DURATION

The Limited Liability Company shall have perpetual existence, commencing on the date of the execution and acknowledgment of these Articles of Organization.

#### ARTICLE IV

#### <u>PURPOSE</u>

The Limited Liability Company is organized for the purpose of transacting any and all lawful business.

#### ARTICLE V

#### MANAGEMENT

The Limited Liability Company is to be manager-managed. The name and address of the

10-16-2003 03:33PM FROM-GRAY HARRIS

883-888-9771

T-440 P.003/004 F-367

(H030002983443)

Initial Manager is:

David D. Henderson 302 South Massachusetts Avenue, Suite 223 Lakeland, FL 33801

#### ARTICLE VI

#### INITIAL REGISTERED OFFICE AND INITIAL REGISTERED AGENT

The street address of the initial registered office of the Limited Liability Company is One Lake Morton Drive, Lakeland, FL 33801, and the name of the initial registered agent of the Limited Liability Company at that office is Christopher M. Fear.

#### ARTICLE VII

#### INDEMNIFICATION

Except to the extent otherwise provided in the Operating Agreement of the Limited Liability Company, the Limited Liability Company shall indemnify each person or entity who was or is a Member, director, officer, employee or agent of the Limited Liability Company to the full extent permitted by law.

IN WITNESS WHEREOF, the undersigned, being an authorized representative of the Initial Manager, has executed these Articles of Organization this 16th day of October, 2003....

CHRISTOPHER M. FEAR

STATE OF FLORIDA COUNTY OF POLK

The foregoing Articles of Organization were acknowledged before me this 16<sup>th</sup> day of October, 2003, by Christopher M. Fear, who is personally known to me.

(AFFIX NOTARY SEAL)

Official Seal
SANDRA 5. FUNK
Notary Public, State of Florida
My comm. expires Jan. 7, 2005
Comm. No. CG980417

NOTARY PUBLIC, State at Large

(Type or print name of Notary)

My Commission expires: 1-7-2005

(H03000298344 3)

863-688-9771

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 AND SECTION 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED AGENT/REGISTERED OFFICE IN THE STATE OF FLORIDA:

- 1. The name of the Limited Liability Company is DUNSON ROAD, LLC
- 2. The name and street address of its initial Registered Agent and initial Registered Office are:

Christopher M. Fear One Lake Morton Drive Lakeland, FL 33801

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.

CHRISTOPHER M. FEAR

Date: October 16, 2003

(H030002983443)