

FROM HOLLAND & KNIGHT TAMPA

LO3000043032

Florida Department of State  
Division of Corporations  
Public Access System

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.

((H03000312164 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 : HOLLAND & KNIGHT  
Account Number : 072100000016  
Phone : (813)227-8500  
Fax Number : (813)229-0134

**LIMITED LIABILITY COMPANY**

**Silver Sparrow Investors, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing

Public Access Help

03/01/03 PM 1:56  
03 MAR - 03 PM 1:31  
RECEIVED

H03000312164 3

**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Silver Sparrow Investors, LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

**Mailing Address:**

4400 140th Avenue North

4400 140th Avenue North

Suite 150

Suite 150

Clearwater, FL 33672

Clearwater, FL 33672

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

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

Martin L. Poad

Name

4400 140th Avenue North, Suite 150

Florida street address (P.O. Box **NOT** acceptable)

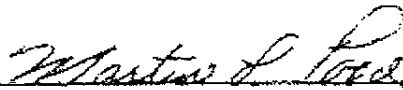
Clearwater,

FLORIDA

33672

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, Florida Statutes.*



Registered Agent's Signature

H03000312164 3

FROM HOLLAND & KNIGHT TAMPA

(THU) 11. 6' 03 14:33/ST. 14:32/NO. 4260953073 P 3

H03000312164 3

**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

Silver Sparrow Angels, LLC

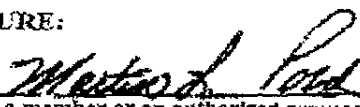
4400 140th Avenue North, Suite 150

Clearwater, FL 33672

(Use attachment if necessary)

**NOTE:** An additional article must be added if an effective date is requested.

**REQUIRED SIGNATURE:**

  
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.)

Martin L. Poad

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)

H03000312164 3