

12-81-2003

01:17PM

FROM: GRAY ROBINSON

863 688 0310

001 004

F-648

L03 000057384

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.

((H03000344054 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 TROEN
Account Number : 120000000092
Phone : (863) 284-2200
Fax Number : (863) 688-0310

03 DEC 31 PM 2:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOT PAID
AND
FILED

LIMITED LIABILITY COMPANY

Medalle Family, LLC

Certificate of Status	1
Certified Copy	1
Page Count	01
Estimated Charge	\$160.00

RECEIVED
03 DEC 31 PM 2:05
DIVISION OF CORPORATION

Electronic Filing Menu

Corporate Filing

Public Access Help

<https://efile.sunbiz.org/scripts/efilcovr.exe>

12/30/2003

Division of Corporations - P.O. BOX 6827 Tallahassee, Florida 32314

12/31/03

(H03000344054 3)

ARTICLES OF ORGANIZATION

OF

MEDALLE FAMILY, LLC

The undersigned hereby present(s) 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 MEDALLE FAMILY, LLC.

ARTICLE II

PRINCIPAL OFFICE

The mailing address and street address of the Limited Liability Company is 3822 Chatsworth Lane, Lakeland, FL 33813.

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

PURPOSE

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 a manager-managed company.

(H03000344054 3)

03 DEC 31 PM 2:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE
AND
FILED

(H03000344054 3)

ARTICLE VIINITIAL 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, Florida 33801 and the name of the initial registered agent of the Limited Liability Company at that office is David D. Hallock, Jr.

ARTICLE VIIINDEMNIFICATION

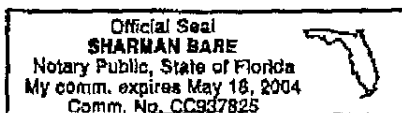
Except to the extent otherwise provided in the Operating Agreement of the Limited Liability Company, the Limited Liability Company shall indemnify each person or entity who was or is a Member, director, officer, employee or agent of the Limited Liability Company to the full extent permitted by law.


IN WITNESS WHEREOF, the undersigned, being an authorized representative of a Member of the Limited Liability Company, has executed these Articles of Organization this 30th day of December, 2003.


David D. Hallock, Jr.

STATE OF FLORIDA
COUNTY OF POLK

The foregoing Articles of Organization were acknowledged before me this 30th day of December, 2003, by David D. Hallock, Jr. as an authorized representative of a Manager of the Limited Liability Company, who is personally known to me.




NOTARY PUBLIC, State of Florida at Large

Sharmen Bare
(Printed Name)

My commission expires: _____ (AFFIX NOTARY SEAL)
My commission number: _____

FILED
03 DEC 31 PM 2:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(H03000344054 3)

**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: Medalle Family, LLC.
2. The name and street address of its initial registered agent and initial registered

office are:

David D. Hallock, Jr., Esq.
GrayRobinson, P.A.
One Lake Morton Drive
Lakeland, Florida 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.



David D. Hallock, Jr.

Date: 12/30/03

AND
FILED
03 DEC 31 PM 2:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA