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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

True Performance LLC

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- ___ Art of Inc. File _____
- ___ LTD Partnership File _____
- ___ Foreign Corp. File _____
- ☒ L.C. File _____
- ___ Fictitious Name File _____
- ___ Trade/Service Mark _____
- ___ Merger File _____
- ___ Art. of Amend. File _____
- ___ RA Resignation _____
- ___ Dissolution / Withdrawal _____
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- ___ Certificate of Good Standing _____
- ___ Certificate of Status _____
- ___ Certificate of Fictitious Name _____
- ___ Corp Record Search _____
- ___ Officer Search _____
- ___ Fictitious Search _____
- ___ Fictitious Owner Search _____
- ___ Vehicle Search _____
- ___ Driving Record _____
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**ARTICLES OF ORGANIZATION
OF FLORIDA LIMITED LIABILITY COMPANY**

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE I — Name:

The name of the Limited Liability Company is: **TRUE PERFORMANCE, LLC**

ARTICLE II — Address:

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

**5355 McIntosh Road
Suite A
Sarasota, Florida 34233**

Article III — Registered Agent, Registered Office

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

**Kraig H. Koach, Esquire
KIMBROUGH & KOACH, LLP
1530 Cross Street
Sarasota, Florida 34236**

Article IV — Management:

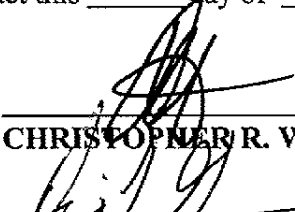
The Limited Liability Company is to be managed by its members and is, therefore, a member-managed company. The name and address of each Managing Member is as follows:

| | |
|-------------|---|
| MGRM | CHRISTOPHER R. WYKOFF, Member 5105 S. Tamiami Trail Sarasota, FL 34231 |
|-------------|---|

| | |
|-------------|--|
| MGRM | DAVID T. GRAVES, Member 5355 McIntosh Road Suite A Sarasota, Florida 34233 |
|-------------|--|

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IN WITNESS WHEREOF, We have signed these Articles of Organization as authorized members and acknowledged them to be our act this 12th day of January, 2004.


CHRISTOPHER R. WYKOFF, Member

 1-12-04
DAVID T. GRAVES, 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.)

CHRISTOPHER R. WYKOFF

Typed or printed name of signee

DAVID T. GRAVES

Typed or printed name of signee

**STATEMENT ACCEPTING APPOINTMENT
AS REGISTERED AGENT**

I hereby accept the designation as registered agent to accept service of process for the above stated limited liability company at the place designated in this statement. 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 under Chapter 608, Florida Statutes.

(In accordance with section 608.408(3), Florida Statutes, the execution of this statement constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)


Signature of Registered Agent

KRAIG H. KOACH

Typed or printed name of signee