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LIMITED LIABILITY COMPANY

Patricia O Harden Retirement LLC

Certificate of Status	0
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FAX AUDIT #

W040000758883

**ARTICLES OF ORGANIZATION
OF
Patricia O Harden Retirement LLC**

ARTICLE I NAME

The name of the limited liability company shall be: **Patricia O Harden Retirement LLC**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 1727 Cedar Bay Road, Jacksonville, Florida 32218.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Patricia O. Harden, 1727 Cedar Bay Road, Jacksonville, Florida 32218. Located in the County of Duval.

ARTICLE IV DURATION

The duration for the limited liability company shall be: 12/31/2044.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Managers and the name and address of the manager of the Limited Liability Company is:

Patricia O. Harden, 1727 Cedar Bay Road, Jacksonville, Florida 32218


Business Filings Incorporated, Organizer

Mark Schiff, AVP

Authorized Representative

Prepared by Mark Schiff, Business Filings Incorporated, 8025 Excelsior Dr., Suite 200,
Madison, WI 53717

(608) 827-5300

FAX AUDIT #

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FAX AUDIT #

4040000958883CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: **Patricia O Harden Retirement LLC**

The name and address of the registered agent and office is: Patricia O. Harden, 1727 Cedar Bay Road, Jacksonville, Florida 32218. Located in the County of Duval.

Having been named as registered agent and to accept service of process for the above stated 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.

Signature:

Patricia O Harden
Patricia O. Harden

Date: April 21, 2004

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