

L04000044566

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

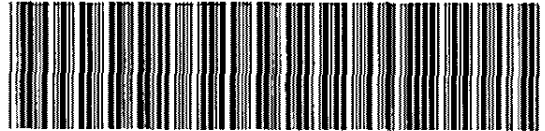
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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June 14, 2004

CORPORATION NAME (S) AND DOCUMENT NUMBER(S):

Turning Pointe, LLC

Filing Evidence

- ☐ Plain/Confirmation Copy
- ☒ Certified Copy

Retrieval Request

- ☐ Photocopy
- ☐ Certified Copy

Type of Document

- ☐ Certificate of Status
- ☐ Certificate of Good Standing
- ☐ Articles Only
- ☐ All Charter Documents to Include Articles & Amendments
- ☐ Fictitious Name Certificate
- ☐ Other

NEW FILINGS	
	Profit
	Non Profit
X	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of RA Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS	
	Annual Reports
	Fictitious Name
	Name Reservation
	Reinstatement

REGISTRATION/QUALIFICATION	
	Foreign
	Limited Liability
	Reinstatement
	Trademark
	Other

**ARTICLES OF ORGANIZATION
OF
TURNING POINTE, LLC**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, being authorized to execute and file these Articles of Organization for the Limited Liability Company hereby being formed under the Florida Statutes Annotated Sections 608.401 to 608.471, hereby certifies that:

FIRST: The name of the Limited Liability Company is: Turning Pointe, LLC.

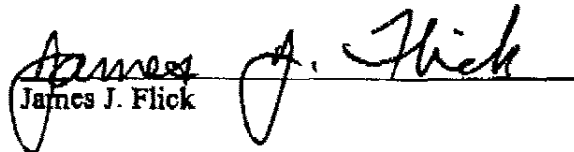
SECOND: The Limited Liability Company is organized to engage in and do any lawful act concerning any lawful business, other than banking and insurance, for which a limited liability company may be organized in accordance with the Florida Statutes Annotated Sections 608.401 to 608.471, including all powers and purposes now and hereafter permitted by law to a limited liability company.

THIRD: The street address of the initial registered office of the Limited Liability Company in Florida is 112 Lake Avenue, Orlando, Florida 32801, and the name of the initial registered agent of the Limited Liability Company in Florida at that address is James J. Flick.

FOURTH: The mailing address and the street address of the principal office of the Limited Liability Company is 3869 Wekiva Springs Road, Longwood, FL 32779.

FIFTH: The Limited Liability Company will be operated by Managers.

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a Member and acknowledged them to be my act this 14 day of June, 2004.

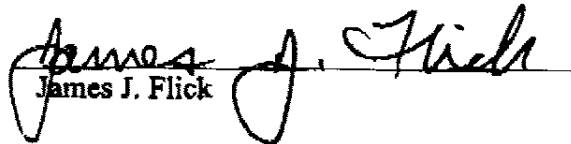

James J. Flick

**CONSENT TO APPOINTMENT
BY REGISTERED AGENT**

I, having been named as Registered Agent for Turning Pointe, LLC, hereby voluntarily consent to serve as Registered Agent for Turning Pointe, LLC.

I know and understand the duties and responsibilities of a Registered Agent as set forth in the Florida Statutes Annotated Sections 608.401 to 608.471, and I hereby accept those duties and responsibilities.

Dated: June 14, 2004.


James J. Flick