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Account Name : HILDA M. PORRO, P.A.

Account Number : 120040000063 Phone : (561)798-3994 Fax Number : (561)795-0579

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## LIMITED LIABILITY COMPANY

S. B. - 4, LLC

 Certificate of Status
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 Estimated Charge
 \$155.00

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## ARTICLES OF ORGANIZATION FOR LIMITED LIABILITY COMPANY

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ARTICLE I -- NAME

The name of the Limited Liability Company shall be S. B. - 4, LLC ("Company").

## ARTICLE II -- ADDRESS

The mailing address and street address of the principal office of the company shall be 14763 Drafthorse Lane, Wellington, Florida, 33414.

## ARTICLE III - REGISTERED OFFICE AND AGENT

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

Harold D. Rusbridge 14763 Drafthorse Lanc Wellington, Florida 33414

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, F.S..

ARTICLE IV -- MANAGEMENT

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company.

(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.)