





BRUCE PAUL ZAVON  
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October 19, 2004

Florida Department of State  
Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee FL 32399

Dear Division of Corporations:

Enclosed are two copies of the Articles of Organization for UWCP LLC, together with a check in the amount of \$125.00. Please stamp and return one copy for my files; a self addressed envelope is enclosed.

Very Truly,



Bruce Paul Zavon

FILED  
2004 OCT 21 P 2:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** UWCP LLC  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Bruce Paul Zavon  
(Name of Person)

Attorney at Law  
(Firm/Company)

18 Ocean Drive  
(Address)

St. Augustine FL 32080  
(City/State and Zip Code)

For further information concerning this matter, please call:

Bruce Paul Zavon at ( 904 ) 471-0319  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

UWCP LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

18 Ocean Drive

St. Augustine FL 32080

**Mailing Address:**

18 Ocean Drive

St. Augustine FL 32080

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

Bruce Paul Zavan, Attorney

Name

18 Ocean Drive

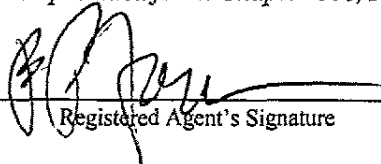
Florida street address (P.O. Box **NOT** acceptable)

St. Augustine

FLORIDA 32080

City, State, and Zip

*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, Florida Statutes..*

  
Registered Agent's Signature

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2009 08 21 10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

Bruce Paul Zavon

18 Ocean Drive

St. Augustine FL 32080

MGRM

Ryan Canon

1340 NE Parvin Road #304

Kansas City MO 64116

MGRM

Richard Perry

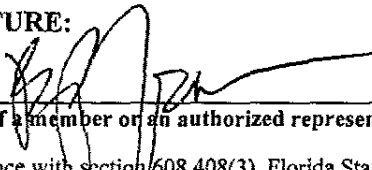
12678 Green Circle

Broomfield CO 80020

(Use attachment if necessary)

**NOTE: An additional article must be added if an effective date is requested.**

**REQUIRED SIGNATURE:**



Signature of a member or an authorized representative of a 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.)

Bruce Paul Zavon

Typed or printed name of signee

**Filing Fees:**

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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TALLAHASSEE, FLORIDA

**FILED**