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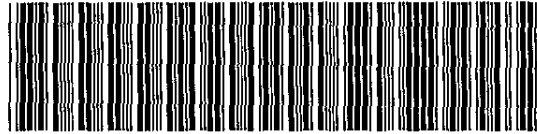
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# CAPITAL CONNECTION, INC.

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

*Wainwright Brothers, LLC*

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- ☐ Art of Inc. File
- ☐ LTD Partnership File
- ☐ Foreign Corp. File
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- ☐ Fictitious Name File
- ☐ Trade/Service Mark
- ☐ Merger File
- ☐ Art. of Amend. File
- ☐ RA Resignation
- ☐ Dissolution / Withdrawal
- ☐ Annual Report / Reinstatement
- ☒ Cert. Copy
- ☐ Photo Copy
- ☐ 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
- ☐ UCC 1 or 3 File
- ☐ UCC 11 Search
- ☐ UCC 11 Retrieval
- ☐ Courier

Signature

Requested by:

Name

Date

Time

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*WL* *11/15* *11:00*

**WAIN WRIGHT BROTHERS  
LIMITED LIABILITY COMPANY**

**ARTICLES OF ORGANIZATION**

**ARTICLE I**

The name of the limited liability company is Wainwright Brothers, L.L.C..

**ARTICLE II**

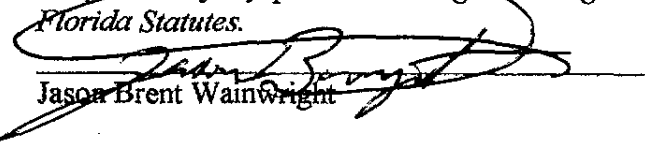
The address of its registered office in the State of Florida is 10868 129<sup>th</sup> Road, Live Oak, Suwannee County, Florida.

**ARTICLE III**

The name of its registered agent at such address is:

Jason Brent Wainwright  
10868 129<sup>th</sup> Road  
Live Oak, Florida 32060.

*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.*

  
Jason Brent Wainwright

**ARTICLE IV**

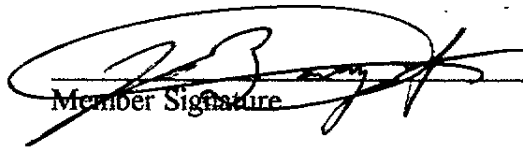
The Limited Liability Company shall be managed by one or more Managers and is therefore a

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manager - managed company.

## ARTICLE V

The members have not addressed additional matters.



Member Signature

(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)

**JASON BRENT WAINWRIGHT**  
**10868 129<sup>TH</sup> ROAD**  
**LIVE OAK, FLORIDA 32060**

**CERTIFICATE OF DESIGNATION**

**REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Florida Statutes, the mentioned Limited Liability 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:

**WAINWRIGHT BROTHERS, L.L.C.**

The name and street address of the registered agent and office is:

**JASON BRENT WAINWRIGHT  
10868 129<sup>TH</sup> ROAD  
LIVE OAK, FLORIDA 32060**

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

  
Designate Signature

10-20-04  
Date