Division of Corporations RETARY OF STATE Public Access Systemal LAHASSEE, FLORIDA

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To:

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name

: A 1 A CORPORATE SERVICES, INC.

Phone

Account Number: I20010000247

: (800)494-3124

Fax Number

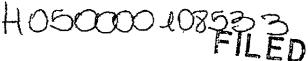
*⇒* \_(305) 675-2811

## LIMITED LIABILITY COMPANY

## **Changing Horses LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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## ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY 7005 14

2005 JAN 14 A 11: 15

In compliance with Chapter 608, F.S.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

#### ARTICLE I NAME

The name of the Limited Liability Company is:

CHANGING HORSES LLC

#### ARTICLE II ADDRESS

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

2007 SE 13TH STREET OCALA, FL 34471

# ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

A1A REGISTERED AGENT INC. 92 SADBERRY RD. QUINCY, FL 32351

Having been named as registered agent 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 all statutes relating to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

A1A REGISTERED AGENT INC. / Registered Agent's Signature

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

#### ARTICLE IV MANAGEMENT

The Limited Liability Company will be managed by one or more managing members and is, therefore, a Member Managed Company.

#### ARTICLE V

The name(s) and address(es) of the managing members of the LLC are:

Managing Member: HELEN HELPLING; 2007 SE 13TH STREET OCALA, FLORIDA 34471

Julin Chalpling

Signature of a member or an authorized representative of a member,

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(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.)

HELEN HELPLING
Typed or printed name of signee

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