

**L05000008272**

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DIVISION OF CORPORATIONS

**LIMITED LIABILITY COMPANY**

**Second Sun LLC**

Certificate of Status	1
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ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name

The name of the Limited Liability Company is: **Second Sun LLC**

## ARTICLE II - Address

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

Principal Office Address:Mailing Address:Box 3295Box 3295North Fort Myers, FL 33918North Fort Myers, FL 33918

## ARTICLE III - Registered Agent, Registered Office &amp; Registered Agent's Signature

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

Thomas J. McKeown

Name

1032 Ione Drive(P.O. Box or Mail Drop Box NOT Acceptable)Fort Myers, FL 33919

(City / State / 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, F.S.

  
Registered Agent's Signature - Thomas J. McKeown

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ARTICLE IV - Manager(s) or Managing Member(s):  
The name and address of each Manager or Managing Member is as follows:

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Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGR

Thomas J. McKeown- 1032 Ione Drive, Fort Myers, FL 33919

(Use attachment if necessary)

**REQUIRED SIGNATURE:**



Signature of a member or 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. )

Thomas J. McKeown

Typed or printed name of signee

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