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## LIMITED LIABILITY COMPANY

Baldridge-Immokalee, L.L.C.

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY TEOMETRY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I - Name:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
The name of the Limited Liability Cor	mpany is:
Baldridge-Immokeles, L.L.C.	
ARTICLE II - Address: The mailing address and street address	s of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
11825 Manchester Road	11825 Manchester Road
St. Louis, Missouri 53131	St. Louis, Missouri 63131
The name and the Florida street address	egistered Office, & Registered Agent's Signature: is of the registered agent are:
c i	Corporation System
-	Name
1200 :	South Pine Island Road
Florid	a street address (P.O. Box NOT acceptable)
Plan	nation, Florida 33324
C	ity, State, and Zip
liability company at the place design registered agent and agree to act in this statutes relating to the proper and con accept the obligations of my position.  Regi	nt and to accept service of process for the above stated limited nated in this certificate, I hereby accept the appointment as is capacity. I further agree to comply with the provisions of all implete performance of my duties, and I am familiar with and in as registered agent as provided for in Chapter 608, F.S  I Corporation System  Stered Agent's Signature  stered Agent's Signature
(C	ONTINUED)

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ARTICLE IV- Manager(s) or Man The name and address of each Manager	aging Member(s): ger or Managing Member is a	s follows:	ED
<u>Title:</u> "MGR" = Manager	Name and Address:	7005 JAN 2	TPEZI
"MGRM" = Managing Member		SECRETAL	RY OF STATE SEE, FLORID!
MGR	Kenneth R. Baldridge	TALLAHAS	OFF. Las.
	11825 Manchester Road		
-	St. Louis, Missouri 63131		
MBR	C. Allen Kann		<u> </u>
	1825 Manceaux Road		
<del></del>	St. Louis, Missouri 63131		_
<u> </u>	·* <u>· · · · · · · · · · · · · · · · · · </u>		_
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(Use attachment if necessary)	4		•
NOTE: An additional article must	be added if an effective date	is requested.	
REQUIRED SIGNATURE			4
Have	M		
Signature of a member	or an authorized representative	of a member.	
(In accordance with sec of this document consti- that the facts stated h	tion 608 408(1), Plorida Statutes, th titles an affirmation under the penal ercin are true.)	se execution ties of perjury	•
	Harold A. Tainberg		

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
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\$ 5.00 Certificate of Status (Optional)

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