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Florida Department of State  
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MJH

## LIMITED LIABILITY COMPANY

William T. Haynes Jr. LLC

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FAX AUDIT # 4050000319483

**ARTICLES OF ORGANIZATION  
OF  
William T. Haynes Jr. LLC**

**ARTICLE I NAME**

The name of the limited liability company shall be: **William T. Haynes Jr. LLC**

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this Limited Liability Company shall be: 90 Alton Rd., Suite 1812, Miami Beach, Florida 33139.

**ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS**

The name and address of the initial registered agent is: William Haynes, 90 Alton Rd, Suite 1812, Miami Beach, Florida 33139. Located in the County of Miami-Dade.

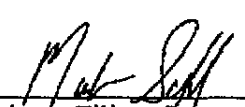
**ARTICLE IV DURATION**

The duration for the limited liability company shall be: 12/31/2045.

**ARTICLE V MANAGERS/MEMBERS**

The management of the limited liability company is reserved for the Members and the name and address of the member of the Limited Liability Company is:

William Haynes, 6660 US Hwy. 60 East, Henderson, Kentucky 42420

  
Business Filings Incorporated, Organizer

Mark Schiff, AVP

Authorized Representative

Prepared by Mark Schiff, Business Filings Incorporated, 8025 Excelsior Dr., Suite 200,  
Madison, WI 53717

(608) 827-5300

FAX AUDIT # 4050000319483

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FAX AUDIT # 4650000319483CERTIFICATE OF DESIGNATION OF REGISTERED  
AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED 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: **William T. Haynes Jr. LLC**

The name and address of the registered agent and office is: William Haynes, 90 Alton Rd., Suite 1812, Miami Beach, Florida 33139. Located in the County of Miami-Dade.

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

Signature: William Haynes

William Haynes

Date: January 25, 2005

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