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To:

TO *					
	Division of Com	٢p	orations		
	Fax Number	:	(850)205-0383		
From	-				
	Account Name	:	KILLGORE, PEARLMAN,	STAMP.	ORNSTEIN & SOUTRES
	Account Number	:	119980000007		
	Phone	;	(407)425-1020		
	Fax Number	÷	(407)839-3635		

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Fax Audit No. H05000058172 3

ARTICLES OF ORGANIZATION FOR SECRET LAKE PARTNERS, LLC

ARTICLE I – Name:

The name of the Limited Liability Company is Secret Lake Partners, 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:

209 Town Center Boulevard	209 Town Center Boulevard			
Davenport, Florida 33896	Davenport, Florida 33896	TAL	05	
		L Circ	MA	
ARTICLE III – Registered Agent, Reg	istered Office, & Registered Agent's Sign	afüre		
The name and Florida street address of re	gistered agent are:	CHE T	AM	ED
	Frank H. Killgore, Jr.	FLO	ف	
2 Sou	th Orange Ave., 5 th Floor	콤드	0	
0	rlando, Florida 32801	D'L	Q.	

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

Frank H. Killgore, Jr., Registered Agent

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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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member

MGR

Village Partners 209 Town Center Boulevard Davenport, FL 33896

Name and Address:

REQUIRED SIGNATURE:

Village Partners, a Florida General Partnership

By: Heidi J. Marling, Partner

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