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HARPER KYNE GELLER BUFORD PA 18 2205038

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Division of Corporations

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Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 205-0383

From:

Account Name : HARPER, KYNES, GELLER & BUFORD  
Account Number : 070651000745  
Phone : (727) 799-4840  
Fax Number : (727) 797-8206

LIMITED LIABILITY COMPANY

FIDK II, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

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**ARTICLES OF ORGANIZATION FOR  
FIDK II, LLC  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - NAME**

The name of the Limited Liability Company is: FIDK II, LLC

**ARTICLE II - ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is: 2323 - 34<sup>th</sup> Way North, Largo, FL 33771.

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE,  
& REGISTERED AGENT'S SIGNATURE**

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

Scott Morris  
2323 - 34<sup>th</sup> Way North  
Largo, FL 33771

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.

  
Scott Morris, Registered Agent

**ARTICLE IV - MANAGEMENT**

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

  
Scott Morris, Manager

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.

Scott Morris  
Typed or printed name of signee

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