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GRAY ROBINSON

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Florida Department of State  
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Division of Corporations  
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From:

Account Name : GRAY, HARRIS & ROBINSON, P.A. - ORLANDO  
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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

Longwood MK, LLC

Certificate of Status	0
Certified Copy	1
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**ARTICLES OF ORGANIZATION**  
**FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

LONGWOOD MK, LLC

**ARTICLE II - Address:**

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

1011 N. WYMORE ROAD  
WINTER PARK, FLORIDA 32789

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

PAMELA O. PRICE  
301 EAST PINE STREET, SUITE 1400  
ORLANDO, FLORIDA 32801

*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

**Article IV - Management:**

The Limited Liability Company is to be managed by its Members and is, therefore, a "Member managed" limited liability company.

  
AUTHORIZED REPRESENTATIVE'S SIGNATURE

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.

**PAMELA O. PRICE**

Typed or printed name of signee

**FILING FEES:**

\$100.00 Filing Fee for Articles of Organization  
\$25.00 Designation of Registered Agent  
\$30.00 Certified Copy (OPTIONAL)  
\$5.00 Certificate of Stamps (OPTIONAL)