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From:  
Account Name : RONALD W. SIKES, PLLC  
Account Number : I20050000064  
Phone : (407) 481-8880  
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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

SORCI ENTERPRISES, LLC

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**ARTICLES OF ORGANIZATION FOR**  
**SORCI ENTERPRISES, LLC**

In compliance with Chapter 608, Florida Statutes (2003):

**ARTICLE I**  
**NAME**

The name of the Limited Liability Company is: **SORCI ENTERPRISES, LLC.**

**ARTICLE II**  
**ADDRESS**

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

8427 South Park Circle, Suite 150  
Orlando, FL 32819

**ARTICLE III**  
**REGISTERED AGENT AND REGISTERED OFFICE**

The name and the Florida street address of the Registered Agent are:

Ronald W. Sikes, Esquire  
1000 East Robinson Street, Suite A  
Orlando, FL 32801

**ARTICLE IV**  
**MANAGEMENT**

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

In witness whereof I have set my hand and seal this 9th day of May, 2005. (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.)



Ronald W. Sikes, Authorized  
Representative of Initial Members

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**ARTICLES OF ORGANIZATION FOR  
SORCI ENTERPRISES, LLC (continued)**

**ACCEPTANCE OF DESIGNATION AS REGISTERED AGENT**

Having been named as Registered Agent and to accept service of process for **SORCI ENTERPRISES, LLC**, 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, Florida Statutes (2003).



Ronald W. Sikes