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Division of Corporations

FAX NO.

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

From: Account Name : FIELDSTONE LESTER SHEAR & DENBERG  
Account Number : I19990000180  
Phone : (305)357-5775  
Fax Number : (305)357-5534

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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

Bray & Gillespie XX, LLC

Certificate of Status	0
Certified Copy	1
Page Count	10
Estimated Charge	\$155.00

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

**BRAY & GILLESPIE XX, LLC**

**ARTICLE II - Address:**

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

600 North Atlantic Avenue  
Daytona Beach, FL 32118

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

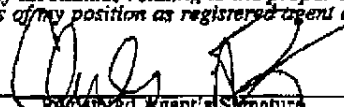
The name and the Florida street address of the registered agent are:

Charles A. Bray  
Name

600 North Atlantic Avenue  
Florida street address (P.O. Box NOT acceptable)

Daytona Beach, FL 32118  
City, State, and Zip

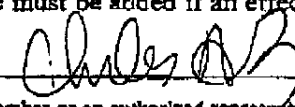
*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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 (Check box if applicable.)**

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

(An additional article must be added if an effective date is requested)

  
\_\_\_\_\_  
Signature of a member or an authorized representative of a member.

(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.)

Charles A. Bray,  
**Authorized Representative**  
\_\_\_\_\_  
Typed or printed name of signer

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