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Division of Corporations

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FINANCIAL LIABILITY COMPANY

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Address No. 10600177/122551

ARTICLE 15 ORGANIZATION FOR FUGITIVE LIMITED LIABILITY COMPANY

ARTICLE 15 - Name:

The name of this Limited Liability Company is: **P.A. CENTER, LLC**

ARTICLE 15 - Address:

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

1134 141 141 141 141 141
Address, FL 33555

ARTICLE 15 - Registered Agent, Registered Office, and Registered Agent's Signature:

The name and full Florida street address of the registered agent is:

John D. Cassman
Name

123 1/2 Court Street, Suite 101

(Florida street address) (P.O. Box is acceptable)

(Orlando, FL 33255)

(City, State, and Zip)

I, the undersigned, a registered agent, hereby accept service of process for the above named limited liability company and its officers and directors, and I hereby accept the appointment as registered agent and agree to act in this capacity for the period of time specified in the provisions of the statutes relating to the powers and duties of a registered agent, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

John D. Cassman
Registered Agent's Signature

(An additional article must be added if a certificate of amendment is requested)

Signature of the member or authorized representative of this member
(in accordance with section 605.08(3)), Florida Statutes, of the execution
of this document constitutes an affirmation under the penalty of perjury
that the facts stated herein are true.

JOHN D. CASSMAN