

# Florida Department of State

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To:

Division of Corporations

Fax Number : (850)205-0383

M. HODGES

From:

Account Name : WINDERWEEDLE, HAINES, WARD & WOODMAN, P.A.

Account Number: 076077002775 Phone : (407)246-8692 Fax Number : (407) 423-7014

# LIMITED LIABILITY COMPANY

SRV HOLDINGS, LLC

| Certificate of Status | 0        |
|-----------------------|----------|
| Certified Copy        | 1        |
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# Articles of Organization of SRV Holdings, LLC

The undersigned, being authorized to execute and file these Articles of Organization, hereby certifies that:

#### ARTICLE I - Name:

The name of the limited liability company is: SRV Holdings, LLC.

#### ARTICLE II - Address:

The mailing address and street address of the principal office of the limited liability company is: 390 North Orange Avenue, Suite 1500, Orlando, Florida 32801.

### Article III - Registered Agent and Registered Office:

The name and the Florida street address of the initial registered agent of the limited liability company are: Gary D. Lipson, 390 North Orange Avenue, Suite 1500, Orlando, Florida 32801.

### Article IV - Management:

The limited liability company is to be managed by a manager or managers and is, therefore, a manager-managed company.

IN WITNESS WHEREOF, the undersigned, as an authorized representative of a member, has signed and acknowledged these Articles of Organization on August 12, 2005.

Jary D. Lipson,

as Authorized Representative

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## Statement Accepting Appointment as Registered Agent

I hereby accept the designation as registered agent to accept service of process for the above stated limited liability company at the place designated in the statement. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am Iamiliar with and accept the obligations of my position as registered agent under Chapter 608, Florida Statutes.

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