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Cochrane And Co

561-687-3528

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Division of Corporations

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To:

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Fax Number : (850) 205-0383

From:

Account Name : COCHRANE & CO., P.A.  
Account Number : I20040000001  
Phone : (561) 684-9566  
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DIVISION OF CORPORATIONS

**LIMITED LIABILITY COMPANY**

**PDTHOMPSON, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION  
OF  
PDTHOMPSON, LLC

ARTICLE I - Name

The name of the Limited Liability Company (the "Company") is PDTHOMPSON, LLC.

ARTICLE II - Address

The mailing address and the street address of the principal office of the Company is 1277 Olympic Circle, West Palm Beach, Florida 33413.

ARTICLE III - Registered Agent

The name and the Florida street address of the Registered Agent are Paul D. Thompson, 1277 Olympic Circle, West Palm Beach, Florida 33413.

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  
Paul D. Thompson

ARTICLE IV - Managing Members

The name and address of each Managing Member is as follows:

Paul D. Thompson  
1277 Olympic Circle  
West Palm Beach, Florida 33413

Sandra B. Thompson  
1277 Olympic Circle  
West Palm Beach, Florida 33413

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.

  
Paul D. Thompson, Member

OCT 12 2005

Date

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