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CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 695524 10463A

AUTHORIZATION :

*Carina Dunlap*

COST LIMIT : \$ 155.00

ORDER DATE : November 8, 2005

ORDER TIME : 12:01 PM

ORDER NO. : 695524-005

CUSTOMER NO: 10463A

FILED  
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TALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: MAXWELL-HANFORD, LLC

EFFECTIVE DATE:

\_\_\_\_ ARTICLES OF INCORPORATION  
\_\_\_\_ CERTIFICATE OF LIMITED PARTNERSHIP  
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
\_\_\_\_ PLAIN STAMPED COPY  
\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carina L. Dunlap - EXT. 2951

EXAMINER'S INITIALS: \_\_\_\_\_

**ARTICLES OF ORGANIZATION OF  
MAXWELL-HANFORD, LLC**

The undersigned hereby forms and establishes a limited liability company pursuant to Chapter 608, Florida Statutes as follows:

**ARTICLE I**

The name of this limited liability company is MAXWELL-HANFORD, LLC.

**ARTICLE II**

This limited liability company shall become effective November 8, 2005, unless sooner terminated as provided in the Operating Agreement executed or to be executed by the members.

**ARTICLE III**

The mailing address and street address of the principal place of business of this limited liability company is 658 West Indiantown Road, Suite 207, Jupiter, Florida 33458. This limited liability company may, at its discretion, change the address of its principal place of business.

**ARTICLE IV**

The name and street address of the initial registered agent of this limited liability company is GREGORY R. COHEN, 712 U.S. Highway One, Suite 400, North Palm Beach, Florida 33408.

**ARTICLE V**

The management of this limited liability company shall be vested in a member or members and is, therefore, a member-managed company. The initial managing member shall be MICHAEL O. MAXWELL, 658 West Indiantown Road, Suite 207, Jupiter, Florida 33458.

**ARTICLE VI**

The initial members are Michael O. Maxwell, 658 West Indiantown Road, Suite 207, Jupiter, Florida 33458, and Thomas Hanford, 658 West Indiantown Road, Suite 207, Jupiter, Florida 33458. Additional members may be admitted to this limited liability company upon such terms and conditions as shall be established by the members as described in the Operating Agreement.

IN TESTIMONY WHEREOF, I have hereunto subscribed my name this 8<sup>th</sup> day of November, 2005.

  
\_\_\_\_\_  
GREGORY R. COHEN

FILED  
NOV-8 PM 2:20  
TALLAHASSEE, FLORIDA

**CERTIFICATE DESIGNATING REGISTERED  
OFFICE FOR THE SERVICE OF PROCESS  
WITHIN THIS STATE, NAMING AGENT  
UPON WHOM PROCESS MAY BE SERVED**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

That MAXWELL-HANFORD, LLC, a Florida Limited liability company, with its office at 658 West Indiantown Road, Suite 207, Jupiter, Florida 33458, has named GREGORY R. COHEN, at 712 U.S. Highway One, Suite 400, North Palm Beach, Florida 33408, as its initial registered agent to accept service of process within this State.

**ACKNOWLEDGMENT:**

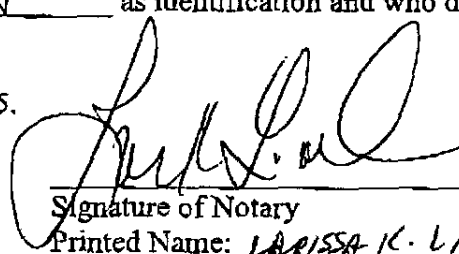
Having been named registered agent to accept service of process for the above-stated limited liability company at the place designated in this Certificate, I hereby accept to act in such capacity and agree to comply with the applicable provisions of law.

By:   
GREGORY R. COHEN  
Registered Agent

STATE OF FLORIDA                     )  
  )  
COUNTY OF PALM BEACH            )

The foregoing instrument was acknowledged before me this 8<sup>th</sup> day of November, 2005 by GREGORY R. COHEN, who is personally known to me or who has produced Florida State Driver's License Number N/A as identification and who did ( ) or did not ( ) take an oath.

Executed this 8<sup>th</sup> day of November, 2005.

  
Signature of Notary  
Printed Name: LARISSA K. LINCOLN  
My Commission Expires:  
My Commission Number:

