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### NORM D. FUGATE, P.A.

Attorney at Law

Norm D. Fugate
Board Centified Attorney
City, County and Local Government Law
Board Certified in Real Estate Law
January 4, 2006

248 Northwest Main Street
Post Office Box 98
Williston, Florida 32696
(352) 528-0019
(352) 528-0019 Fax
SECRETARY OF STATE

Department of State Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

SUBJECT: Paul Sharp Stables, LLC

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Norm D. Fugate Attorney at Law Post Office Box 98 Williston, Florida 32696

For further information concerning this matter, please call:

Norm D. Fugate at (352) 528-0019

Enclosed is a check made payable to the Florida Department of State for \$125.00 for the filing of this limited liability company.

Sincerely

Norm D./Fugar

NDF/lnm Enclosure

#### ARTICLES OF ORGANIZATION

OF

FILED

#### PAUL SHARP STABLES, LLC

ARTICLE I - NAME

2006 JAN -6 P 3: 00 SECRETARY OF STATE TALLAHASSEE, FLORIDA

The name of the limited liability company is Paul Sharp Stables, LLC, ("company").

#### ARTICLE II - ADDRESS

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

Principal Office Address:

Mailing Address:

17470 NE 2nd Place Williston, Florida 32696 Post Office Box 591 Williston, Florida 32696

## ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

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

Paul M. Sharp 17470 NE 2nd Street Williston, Florida 32696

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..

Paul M. Sharp

#### ARTICLE IV - MANAGERS OR MANAGING MEMBERS

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

Title:

Name and Address:

"MGR" = Manager

"MGMR" = Managing Member

**MGMR** 

Paul M. Sharp Post Office Box 591 Williston, Florida 32696

ARTICLE V - EFFECTIVE DATE

The effective date of the company shall be January 1, 2006.

REQUIRED SIGNATURE:

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.)

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Paul M. Sharp

Typed or printed name of signee

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Under the provisions of F.S. 608.415 or 608.507, Paul Sharp Stables, LLC, submits the following statement to designate a registered office and registered agent in the state of Florida:

- 1. The name of the limited liability company is Paul Sharp Stables, LLCSSFE, FLORIDA
- The name and address of the registered agent in Florida are:
   Paul M. Sharp
   17470 NE 2nd Street

Williston, Florida 32696

The undersigned, being the person named in the articles of organization of Paul Sharp Stables, LLC, as the registered agent of this limited liability company, hereby consents to accept service of process for the above-stated company at the place designated in the articles of organization, and accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of his or her duties, and is familiar with and accepts the obligations of the position of registered agent.

Paul M. Sharp Registered Agent