

## Florida Department of State

Division of Corporations

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## To:

Division of Corporations

Fax Number : (850) 205-0383

## From:

Account Name : SHUMAKER, LOOP &amp; KENDRICK LLP

Account Number : 075500004387

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DIVISION OF CORPORATIONS

FLORIDA/FOREIGN LIMITED LIABILITY CO.

GATOR DOOR ACQUISITION, LLC

2006 MAR - 1 AM 8:10

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Certificate of Status	1
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**ARTICLES OF ORGANIZATION  
GATOR DOOR ACQUISITION, LLC**

**ARTICLE I - Name:**

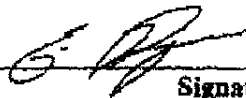
The name of the Limited Liability Company is GATOR DOOR ACQUISITION, LLC.

**ARTICLE II - Address:**

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

3000 Gulf to Bay Boulevard  
Suite 300  
Clearwater, Florida 33759

IN WITNESS WHEREOF, I have signed these Articles of Organization as a member and acknowledged them to be my act this 28<sup>th</sup> day of February, 2006.



Signature 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.)

Eric Pogue

Typed or printed name of signer

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY 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 **GATOR DOOR ACQUISITION, LLC.**
2. The name and the Florida street address of the registered agent are:

Eric Pogue  
3000 Gulf to Bay Boulevard  
Suite 300  
Clearwater, Florida 33759

*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.*

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Signature

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