Division of Corporations

Florida Department of State

Division of Corporations

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Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : NASON, YEAGER, GERSON, WHITE & LIOCE, P.A.

Account Number : 073222003555 Phone : (561)686-3307 Fax Number : (561)686-5442

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Triple F Equestrian, LLC

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ARTICLES OF ORGANIZATION OF TRIPLE F EQUESTRIAN, LLC

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, the undersigned authorized representative of the Members, hereby make, acknowledge and file these Articles of Organization for the purpose of forming a limited liability company under the laws of the State of Florida.

ARTICLE I

The name of this limited liability company is:

Triple F Equestrian, LLC

ARTICLE II ADDRESS

The principal address and mailing address of this limited liability company is:

2875 South Ocean Boulevard, Suite 214 Palm Beach, Florida 33480

ARTICLE III DURATION

The period of duration for this limited liability company shall be perpetual.

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ARTICLE IV

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MANAGEMENT

SECRETARY OF STATE

TALLAHASSEE FOORIDA

The powers of this limited liability company shall be exercised by or under the authority of RIDA and the business and affairs of this limited liability company shall be managed under the direction of its Members and is, therefore, a member-managed company.

ARTICLE V ADMISSION OF ADDITIONAL MEMBERS

The Members shall have the right to admit additional members.

IN WITNESS WHEREOF, the undersigned authorized representative of the Members has made and subscribed these Articles of Organization at West Palm Beach, Florida, for the uses and purposes aforesaid, this 16th day of March, 2006.

Alan I. Armour, II

Authorized Representative of the Members

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORID SEGRETARY OF STATE 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:

TRIPLE F EQUESTRIAN, LLC

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

Alan I. Armour II 1645 Palm Beach Lakes Boulevard, Suite 1200 West Palm Beach, Florida 33401

Having been named as registered agent to accept service of process for the above-stated limited liability company, at the location designated herein, I hereby consent to and accept the appointment to act in this capacity, acknowledge that I am familiar with and accept the obligations of a registered agent and agree to comply with the laws of Florida applicable thereto.

Alan I. Armour II, Registered Agent

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