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ACCOUNT NO. : 07210000032 REFERENCE: 179303 AUTHORIZATION : COST LIMIT : \$ 155.00 ORDER DATE: June 14, 2006 ORDER TIME : 3:22 PM ORDER NO. : 179303-010 CUSTOMER NO: 7448543 DOMESTIC FILING NAME: BENDERSON-KENDALL ASSOCIATES I, LLC EFFECTIVE DATE: ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: XX CERTIFIED COPY PLAIN STAMPED COPY ____ CERTIFICATE OF GOOD STANDING CONTACT PERSON: Susie Knight - EXT. 2956

EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	s:		
Benderson-Kendall Associates I, LLC	in J.C. and March of the state		
(Must end with the words "Limited Liability Company, "Limited Liability Company, "Limited Liability Company,"	ited Company" or their appreviation "LLC," or "L.C.,")		
ARTICLE II - Address:			
The mailing address and street address of the p	principal office of the Limited Liability Con	npany is:	
Principal Office Address:	Mailing Address:		
8441 Cooper Creek Boulevard	8441 Cooper Creek Boulevard		
University Park, Florida 34201	University Park, Florida 34201		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regibusiness entity with an active Florida registration.)		er :-	.
The name and the Florida street address of the	registered agent are:	86 JUN	255 255 255 255 255 255 255 255 255 255
Kevin M. Kinney		72.	記す
Nam	c ·		SAL
8441 Cooper Creek Boulevard		至	경우 음s
Florida street a	ddress (P.O. Box <u>NOT</u> acceptable)	ထ္	AE
University Park	FL FL 34201	59	로
. City, State	, and Zip		S
•			

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..

By: Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

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

MGR	David H. Baldauf
	8441 Cooper Creek Boulevard
	University Park, Florida 34201
(Use attachment if necessary	
CI F V. Effective data if of	han the date of filing: (OPTIONAL)
	must be specific and cannot be more than five business days prio
	-
effective date is listed, the d	· .
effective date is listed, the d	

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.) Daivd H. Baldauf, Manager

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee