## Florida Department of State

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To:

Division of Corporations

Fax Number

: (850)205-0383

Account Name

: A 1 A CORPORATE SERVICES, INC.

Account Number : 120010000247

Phone

(800) 494-3124

Fax Number

(305) 675-2811

FLORIDA/FOREIGN LIMITED I

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# ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608,F.S.

ARTICLE I: NAME

The name of the Limited Liability Company is:

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**ARTICLE II: Address** 

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

**807 PLANTERS GROVE DRIVE** 

JACKSONVILLE, FLORIDA 32221

ARTICLE III: REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

A1A REGISTERED AGENT INC.

92 SADBERRY ROAD

QUINCY, FLORIDA 32351

Having been named as registered agent 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.

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A1A REGISTERED AGENT INC. / REGISTERED AGENT'S SIGNATURE

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### ARTICLE IV: MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V: MEMBERS (optional)

#### **MANAGING MEMBER:**

FRANK W. HANNA 807 PLANTERS GROVE DRIVE JACKSONVILLE, FLORIDA 32221

#### **MANAGING MEMBER:**

CHAD B. PEEK
1137 WOODRUFF AVE
JACKSONVILLE, FLORIDA 32205

OF JUN 21 AM 9: 15



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.)

FRANK W. HANNA