

Aug-24-2006 01:40pm

From: RUDEN, MCCLOSKEY, SMITH, SCHUSTER & ASSOCIATES, P.A.

0070344506

T-230

P-0017003

F-261

Page 1 of 1

L06000084095

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H06000213187 3)))



H060002131873ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

RECEIVED

06 AUG 24 PM 2:15

DIVISION OF CORPORATIONS

To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : RUDEN, MCCLOSKEY, SMITH, SCHUSTER & ASSOCIATES, P.A.
Account Number : 075077000521
Phone : (954) 527-2428
Fax Number : (954) 333-4001

2006 AUG 24 A 9:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

FLORIDA/FOREIGN LIMITED LIABILITY CO.

CHD Partners LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

AL1

Electronic Filing Menu

Corporate Filing Menu

Help

HT06000213187 3

**ARTICLES OF ORGANIZATION
OF
CHD PARTNERS LLC
a Florida Limited Liability Company**

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a Limited Liability Company under the laws of the State of Florida do set forth the following:

1. NAME. The name of the Limited Liability Company is CHD PARTNERS LLC (the "Company").
2. MAILING AND STREET ADDRESS OF PRINCIPAL OFFICE. The mailing address for the Company is: 7777 Glades Road, Suite 201, Boca Raton, Florida 33434.
3. REGISTERED AGENT. The name and address of the initial registered agent in the State of Florida, whose Consent to Appointment as Registered Agent accompanies these Articles of Organization, is: Melissa Crowe at 7777 Glades Road, Suite 201, Boca Raton, Florida 33434.

The undersigned has executed these Articles of Organization on the 24th day of August, 2006.

By: Melissa Crowe
Melissa Crowe, Authorized Representative

2006 AUG 24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
A 9:25

FILED

HT06000213187 3

**CERTIFICATION 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 IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: CHD Partners LLC
2. The name and address of the registered agent and office is:

Melissa Crowe
7777 Glades Road, Suite 201
Boca Raton, Florida 33434

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 its 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.


Melissa Crowe, Registered Agent

Date

8/24/06

FILED
2006 AUG 24 A 9:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11/1/2006 11:11:11