Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (650)205-0383

From:

Account Name : A.B.S. OF JACKSONVILLE, INC.

Account Number : 120010000215

: (904)777-1533

Fax Number

: (904)777-1717

ELORIDA/FOREIGN LIMITED LIA

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Fox Den Services, LLC

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I. NAME:

The name of the Limited Liability Company is: Fox Den Services, LLC

ARTICLE II. ADDRESS:

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

1588 Slash Pine Court Orange Park, FL 32073

ARTICLE III. REGISTERED AGENT, REGISTERED OFFICE, & REGISTERE AGENT'S SIGNATURE:

The name and Florida street address of the registered agent are: Shelia L. Clark
1588 Slash Pine Court
Orange Park, Ft. 32073

Having been named as registered agent and to accept service of process for the above stated limited hability company at the place of 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, Florida Statutes.

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Registered Agent

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ARTICLE IV. MANAGER(S) OR MANAGING MEMBER(S):

The name(s) and address(es) of each Manager or Managing Member is as follows:

Title: MGR.

Name and Address: Shelia L. Clark 1588 Slash Pine Court Orange Park, FL 32073

(in accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true.)

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