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Florida Department of State  
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To:

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

From:

Account Name : FALLACE & LARKIN, L.C.  
Account Number : I20000000191  
Phone : (321) 951-9900  
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TALLAHASSEE, FLORIDA

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**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**Village Drive Professional Center, LLC**

Certificate of Status	1
Certified Copy	1
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ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE I - NAME

The name of the Limited Liability Company is Village Drive Professional Center, LLC.

ARTICLE II - ADDRESS

Principal Office Address

Mailing Address

931 Stratford Place  
Melbourne, FL 32940

931 Stratford Place  
Melbourne, FL 32940

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE

David G. Larkin  
1900 S. Hickory St., Ste. A  
Melbourne, FL 32901

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, Florida Statutes.

ARTICLE IV - MANAGER(S) OR MANAGING MEMBER(S)

Title  
"MGR" = Manager  
"MGRM" = Managing Member

Name and Address

MGR

John D. Haley  
645 Classic Court  
Melbourne, FL 32940

MGR

Rick Kendust  
7630 N. Wickham Rd.  
Melbourne, FL 32940

MGR

Barry F. Richardson  
931 Stratford Place  
Melbourne, FL 32940

  
(Signature of a member or an authorized representative of 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)

  
(Typed or Printed Name of Signee)

DAVID G. LARKIN

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