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January 9, 2007

CORPORATION NAME (S) AND DOCUMENT NUMBER

Arnold Enterprise of Ocala, LLC

	Filing Evidence  ☑ Plain/Confirmation Copy	Type of Document  ☐ Certificate of Status	
	□ Certified Copy	☐ Certificate of Good Standing	
		□ Articles Only	
	Retrieval Request  Photocopy  Certified Copy	<ul> <li>□ All Charter Documents to Inclu-Articles &amp; Amendments</li> <li>□ Fictitious Name Certificate</li> <li>□ Other</li> </ul>	de
	NEW FILINGS	AMENDMENTS	
	Profit	Amendment	
	Non Profit	Resignation of RA Officer/Director	
X	Limited Liability	Change of Registered Agent	
	Domestication	Dissolution/Withdrawal	
	Other	Merger	
	OTHER FILINGS	REGISTRATION/QUALIFICATION	
	Annual Reports	Foreign	
	Fictitious Name	Limited Liability	
	Name Reservation	Reinstatement	
	Reinstatement	Trademark	
		Other	

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

#### ARNOLD ENTERPRISE OF OCALA, LLC



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

#### **Principal Office Address:**

**Mailing Address:** 

ALAHASSE OF SHELL

5500 SW 42<sup>nd</sup> Place Ocala FL 34474 5500 SW 42<sup>nd</sup> Place Ocala FL 34474

# ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Tridiv N. Saha 5500 SW 42<sup>nd</sup> Place Ocala FL 34474

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.

Tridiy N. Saha

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

The names and addresses of the Manager(s) is/are as follows:

Title:

Name and Address:

"MGR"

Tridiv N. Saha 5500 SW 42<sup>nd</sup> Place Ocala FL 34474

# **REQUIRED SIGNATURE:**

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.)

Tridiv N. Saha

Typed or printed name of signee