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☐ PICK-UP

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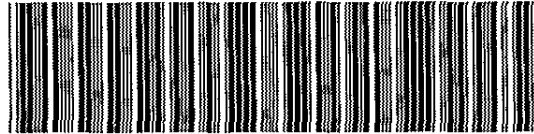
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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H.A.M., LLC

- \_\_\_ Art of Inc. File
- \_\_\_ LTD Partnership File
- \_\_\_ Foreign Corp. File
- ✓ L.C. File
- \_\_\_ Fictitious Name File
- \_\_\_ Trade/Service Mark
- \_\_\_ Merger File
- \_\_\_ Art. of Amend. File
- \_\_\_ RA Resignation
- \_\_\_ Dissolution / Withdrawal
- \_\_\_ Annual Report / Reinstatement
- ✓ Cert. Copy
- \_\_\_ Photo Copy
- \_\_\_ Certificate of Good Standing
- \_\_\_ Certificate of Status
- \_\_\_ Certificate of Fictitious Name
- \_\_\_ Corp Record Search
- \_\_\_ Officer Search
- \_\_\_ Fictitious Search
- \_\_\_ Fictitious Owner Search
- \_\_\_ Vehicle Search
- \_\_\_ Driving Record
- \_\_\_ UCC 1 or 3 File
- \_\_\_ UCC 11 Search
- \_\_\_ UCC 11 Retrieval
- \_\_\_ Courier

Signature

Requested by: WL

2/1

Name

Date

Time

Walk-In

Will Pick Up

ARTICLES OF ORGANIZATION FOR  
H.A.M., LLC  
A FLORIDA LIMITED LIABILITY COMPANY

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TALLAHASSEE, FLORIDA

ARTICLE I - NAME

The name of the Limited Liability Company is: **H.A.M., LLC**

ARTICLE II - ADDRESS

The mailing address of the principal office of the Limited Liability Company is: **Post Office  
Box 260206, Tampa, Florida 33685-0206**

The street address of the principal office of the Limited Liability Company is: **5706 Bridle  
Path Lane, Tampa, Florida 33634**

ARTICLE III - DURATION

The period of duration for the Limited Liability Company shall be: **Until dissolved  
pursuant to its Operating Agreement.**

ARTICLE IV - MANAGEMENT

The Limited Liability Company is to be managed by the members. The names and  
addresses of the managing members are:

Kenneth A. Roth  
16329 Emerald Cove Drive  
Lutz, Florida 33549

Linda K. Roth  
16329 Emerald Cove Drive  
Lutz, Florida 33549

**ARTICLE V - ADMISSION OF ADDITIONAL MEMBERS**

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be: **Additional members may be admitted only as unanimously agreed upon by the Members as set forth in the Operating Agreement.**

**ARTICLE VI - MEMBERS RIGHTS TO CONTINUE BUSINESS**

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be: **Only with the consent of all the remaining Members.**

IN WITNESS WHEREOF, these Articles of Organization have been signed, as Managing Members, by: **Kenneth A. Roth and Linda K. Roth.**

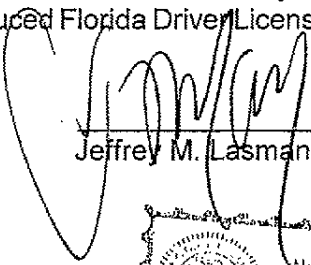
Dated this 20<sup>th</sup> day of January, 2007.

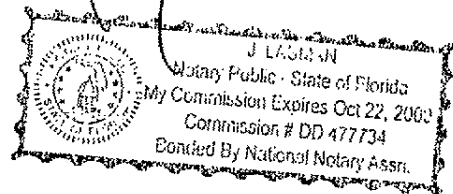
  
Kenneth A. Roth  
Managing Member

  
Linda K. Roth  
Managing Member

STATE OF FLORIDA  
COUNTY OF HILLSBOROUGH

The foregoing instrument was acknowledged before me this 20<sup>th</sup> day of January, 2007, by  
**Kenneth A. Roth** and **Linda K. Roth**, who have produced Florida Driver Licenses as identification.

  
\_\_\_\_\_  
Jeffrey M. Lasman, Notary Public



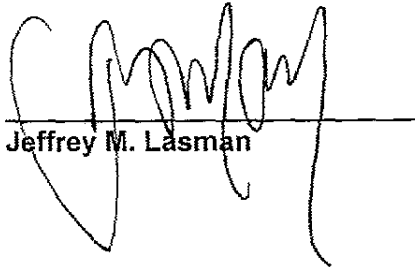
**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, 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: **H.A.M., LLC**
2. The name and address of the registered agent and office is:

**Jeffrey M. Lasman, Esquire  
LASMAN LAW FIRM, P.A.  
6152 Delancey Station Street, Suite 205  
Riverview, Florida 33569**

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.

  
\_\_\_\_\_  
Jeffrey M. Lasman

January 20, 2007  
(Date)