

Division of Corporations

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Florida Department of State  
 Division of Corporations  
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To:  
 Division of Corporations  
 Fax Number : (850) 205-0383

From: GAIL S. ANDRE'  
 Account Name : LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.  
 Account Number : 072720000036  
 Phone : (407) 843-4600  
 Fax Number : (407) 843-4444

PLEASE ARRANGE FILING OF THE ATTACHED ARTICLES OF ORGANIZATION AND RETURN A CERTIFICATION AND CERTIFICATE OF STATUS TO ME AS SOON AS POSSIBLE.  
 THANK YOU FOR OUR ASSISTANCE IN THIS MATTER.

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 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**525-0633, LLC**

|                       |          |
|-----------------------|----------|
| Certificate of Status | 1        |
| Certified Copy        | 1        |
| Page Count            | 01       |
| Estimated Charge      | \$160.00 |

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**ARTICLES OF ORGANIZATION  
OF  
525-0633, LLC**

**ARTICLE I - NAME**

The name of this limited liability company is 525-0633, LLC (the "Company").

**ARTICLE II - PRINCIPAL OFFICE**


The mailing address and street address of the principal office of the Company is 1951 Forrest Road, Winter Park, Florida 32789.

**ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT**

The street address of the initial registered office of the Company is 215 North Eola Drive, Orlando, Florida 32801 and the name of the initial registered agent of the Company at that address is James F. Heekin.

**ARTICLE IV - MANAGEMENT**

The Company is to be managed by one or more managers and is, therefore, a manager-managed company.

  
Signature of a Member or an Authorized  
Representative of a Member

James F. Heekin  
Typed or Printed Name of Signer

**ACCEPTANCE OF REGISTERED AGENT**

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.

  
James F. Heekin

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TALLAHASSEE, FLORIDA

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