

Division of Corporations

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**L07000032310**

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 : 0727200000036  
Phone : (407) 843-4600  
Fax Number : (407) 843-4444

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

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TALLAHASSEE, FLORIDA

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

743 FERNCREEK, LLC

|                       |          |
|-----------------------|----------|
| Certificate of Status | 0        |
| Certified Copy        | 1        |
| Page Count            | 01       |
| Estimated Charge      | \$155.00 |

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**ARTICLES OF ORGANIZATION  
OF  
743 FERNCREEK, LLC**

**ARTICLE I - NAME**

The name of this limited liability company is 743 Ferncreek, LLC (the "Company").

**ARTICLE II - PRINCIPAL OFFICE**

The mailing address and street address of the principal office of the Company is  
1616 Woodward Street, Orlando, Florida 32803.

**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. Heckin, Jr.

**ARTICLE IV - MANAGEMENT**

The Company is to be managed by its sole member and is, therefore, a member  
managed company.

  
Signature of a Member or an Authorized  
Representative of a Member

James F. Heckin, Jr.  
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. Heckin, Jr.

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