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Reply To:

ALBERT C. PENSON MARY ELLEN DAVIS JENNIFER L. SWEETING DONNA S. BIGGINS ADAM R. COWHEY ☐ 2810 REMINGTON GREEN CIRCLE TALLAHASSEE, FLORIDA 32308 TEL (850) 561-8000 L FAX (850) 561-8030

P.O. BOX 1720 17 HIGH DRIVE, SUITE C CRAWFORDVILLE, FLORIDA 32326 17 TEL (850) 926-6003 FAX (850) 926-4944

EFFECTIVE DATE

May 24, 2007

Department of State Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re: Articles of Organization of Brave, LLC

Dear Sir or Madam:

Enclosed are an original and one copy of the Articles of Organization of E J Land, LLC. Also enclosed is a check in the amount of \$155.00 representing the \$125.00 filing fee and \$30.00 for the certified copy that will be picked up by our courier on May 25, 2007.

Thank you for your assistance in this matter and please feel free to contact me should you have any questions regarding this matter.

Sincerely,

Patricia Ryan, Paralegalito

Albert C. Penson Penson & Davis, P.A.

:par

Enclosure(s)

EFFECTIVE DATE 6 07

ARTICLES OF ORGANIZATION

BRAVE, LLC

A LIMITED LIABILITY COMPANY

(Pursuant to Chapter 608, Florida Statutes)

1. Name. The name of the limited liability company is:

BRAVE, LLC

- 2. **Purpose.** The purpose of this limited liability company may include the transaction of any and all lawful business for which limited liability companies may be organized in the state of Florida.
- 3. Address of Principal Office. The street address of the principal office of the limited liability company is:

3975 W.W. Kelley Road Tallahassee, Florida 32311

4. **Mailing Address.** The mailing address of the limited liability company is:

3975 W.W. Kelley Road Tallahassee, Florida 32311

5. Members at Time of Formation. The name of each member at the time of formation:

LYNN SIMPKINS EDEL 3975 W.W. Kelley Road Tallahassee, Florida 32311 JULIA DAWN EDEL 3975 W.W. Kelley Road Tallahassee, Florida 32311

- 6. **Period of Duration.** The period of duration shall be perpetual.
- 7. <u>Management.</u> Management of the Limited Liability Company at the time of formation is reserved for the managing member(s).



8. Registered Agent, Registered Office, and Registered Agents Signature. The name and the Florida Street address of the registered agent are:

Albert C. Penson 2810 Remington Green Circle Tallahassee, Florida 32308

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 provisional 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, F.S.

Albert C. Penson

9. **Effective Date.** The effective date of the limited liability company shall be:

June 1, 2007

ŁYNN SIMPKINS EDEL

Managing Member

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true and correct.)