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(Requestor's Name)

(Address)

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(Business Entity Name)

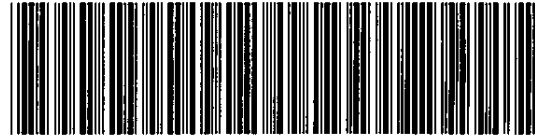
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DIVISION OF CORPORATIONS  
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JB

# ABEL | BAND®

ATTORNEYS AND COUNSELORS AT LAW

Mailing Address: P.O. Box 49948, Sarasota, FL 34230-6948

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Jack M. Maag, Paralegal

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Please refer to our file number: 5270-1

September 13, 2007

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

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DIVISION OF CORPORATIONS  
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Re: *Abel Family Properties, L.L.C.*

To Whom It May Concern:

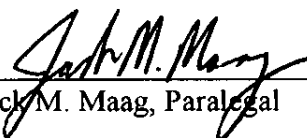
Enclosed please find original and duplicate Articles of Organization for the referenced Limited Liability Company, together with a check in the amount of \$155.00 to cover the following:

Filing of the Articles & Registered Agent fee	\$125.00
Certified copy of the Articles	30.00

Please return the certified copy of the Articles to the undersigned in the enclosed envelope.

Sincerely,

ABEL BAND, CHARTERED

  
\_\_\_\_\_  
Jack M. Maag, Paralegal

JMM  
Enclosures

SARASOTA, FLORIDA

VENICE, FLORIDA

TALLAHASSEE, FLORIDA

DENVER, COLORADO

**ABEL BAND, CHARTERED**

# ARTICLES OF ORGANIZATION

Abel Family Properties, L.L.C.,  
a Florida limited liability company

## ARTICLE I NAME

The business and affairs of the Limited Liability Company shall be conducted under the name of:

Abel Family Properties, L.L.C.

## ARTICLE II PRINCIPAL OFFICE

The street address and the mailing address of the principal place of business of the Limited Liability Company shall be:

1515 Hillview Drive  
Sarasota, FL 34239

## ARTICLE III INITIAL REGISTERED AGENT/OFFICE

The registered office of the Limited Liability Company and its initial registered agent shall be:

Saralyn Abel Dorrill  
1515 Hillview Drive  
Sarasota, FL 34239

## ARTICLE IV MANAGEMENT AND POWERS

The business and affairs of the Limited Liability Company shall be managed by one or more Managers elected as provided in the Operating Agreement and Regulations of the Limited Liability Company.

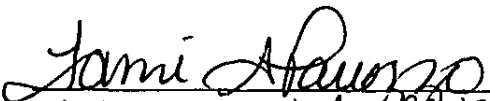
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IN WITNESS WHEREOF, these Articles of Organization have been executed as of the  
12<sup>th</sup> day of September, 2007.

WITNESSES:

  
Print Name DENISE L. OLSEN

  
Saralyn Abel Dorrill

  
Print Name TAMI A. PANOZZO

“MANAGER”

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CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 608.415 of the Florida Statutes, the undersigned Limited Liability Company submits the following statement to designate a registered office and registered agent in the State of Florida.

1. The name of the Limited Liability Company is:

Abel Family Properties, L.L.C.

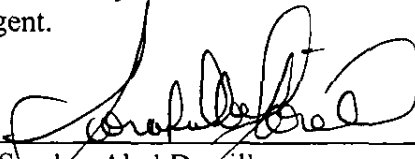
2. The name and the Florida street address of the registered agent are:

Saralyn Abel Dorrill  
1515 Hillview Drive  
Sarasota, FL 34239

Having been named 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Date: \_\_\_\_\_

9/12/07

  
Saralyn Abel Dorrill

“REGISTERED AGENT”

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