

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)617-6383

From:

Account Name : ANSBACHER & SCHNEIDER, PA  
Account Number : 072647001172  
Phone : (904)296-0100  
Fax Number : (904)296-2842

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

11315 Distribution Ave. E., L.L.C.

Certificate of Status	0
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**ARTICLES OF ORGANIZATION OF**  
**11315 DISTRIBUTION AVE. E., L.L.C.**

**ARTICLE I**

The name of this Limited Liability Company shall be 11315 Distribution Ave. E., L.L.C., a limited liability company.

**ARTICLE II**

11315 Distribution Ave. E., L.L.C. shall have perpetual existence.

**ARTICLE III**

11315 Distribution Ave. E., L.L.C. is created to engage in any lawful act, business or activity for which limited liability companies may be formed under the laws of the State of Florida and to do any and all other things which are necessary, desirable or incidental to the foregoing purpose.

**ARTICLE IV**


The principal place of business of 11315 Distribution Ave. E., L.L.C. shall be 6260 DuPont Station Court, Suite D, Jacksonville, Florida 32217 and the mailing address shall be P.O. Box 551260, Jacksonville, Florida 32255 and such other place or places as the Member from time to time may determine.

The initial registered agent of 11315 Distribution Ave. E., L.L.C. shall be Ansbacher & Schneider, P.A. whose address is 5150 Belfort Road, Building 400, Jacksonville, Florida, 32256.

**ARTICLE V**

11315 Distribution Ave. E., L.L.C. will be managed by its Managing Member.

IN WITNESS WHEREOF, these Articles of Organization have been duly executed.

  
\_\_\_\_\_  
Michael N. Schneider  
Authorized Representative

Michael N. Schneider  
Fl. Bar No. 166929  
P.O. Box 551260  
Jacksonville, FL 32255-1260  
(904) 295-0100

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

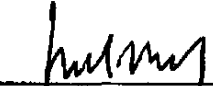
Pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned limited liability company submits the following statement in designating the registered office/registered agent, in the State of Florida.

The name of the organization is 11315 Distribution Ave. E., L.L.C., a Limited Liability Company.

The name and address of the registered agent and office is:

Ansbacher & Schneider, P.A.  
5150 Belfort Road, Building 100  
Jacksonville, FL 32256

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.

  
\_\_\_\_\_  
Michael N. Schneider, Esq. for  
Ansbacher & Schneider, P.A., Registered Agent

October 17, 2007  
\_\_\_\_\_  
Date

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