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FLORIDA/FOREIGN LIMITED LIABILITY CO.

Ward Investment Group, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
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Electronic Filing Menu

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Help

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FAX AUDIT # 16700 3014933

ARTICLES OF ORGANIZATION OF Ward Investment Group, LLC

ARTICLE I

NAME

The name of the limited liability company shall be: Ward Investment Group, LLC

ARTICLE II

PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 4765 Autumndale Dr, Pace, Florida 32571.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Allan Ward, 4765 Autumndale Dr, Pace Florida 32571. Located in the County of Santa Rosa.

ARTICLE IV DURATION

The duration for the limited liability company shall be: 12/31/2047.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the names and addresses of the members of the Limited Liability Company are:

Teresa Ward, 4765 Autumndale Dr, Pace, Florida 32571 Allan Ward, 4765 Autumndale Dr, Pace, Florida 32571

Business Filings Incorporated, Organizer

Mark Williams, A.V.P.

Authorized Representative

Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison,

WI 53717

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ed, 8040 Excelsior Dr., Suite 200, Madis

Date: December 13, 2007

FAX AUDIT # HO70003014933

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: Ward Investment Group, LLC

The name and address of the registered agent and office is Allan Ward, 4765 Autumndale Dr, Pace, Florida 32571. Located in the County of Santa Rosa.

Having been named as registered agent and to accept service of process for the above stated 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.

Signature:

: Allan Ward

Date:

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