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| (Re                                     | equestor's Name) |             |
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| PICK-UP                                 | ☐ WAIT           | MAIL        |
| (Bu                                     | siness Entity Na | me)         |
| (Do                                     | cument Number)   | )           |
| Certified Copies                        | _ Certificate    | s of Status |
| Special Instructions to Filing Officer: |                  |             |
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SECRETARY OF STATE

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EXAMINER

| •                                                                 |              |                                          |                             |
|-------------------------------------------------------------------|--------------|------------------------------------------|-----------------------------|
| CORPDIRECT AGE<br>515 EAST PARK AV<br>TALLAHASSEE, FI<br>222-1173 | ENUE .       | rmerly CCRS)                             |                             |
| FILING COVER<br>ACCT. #FCA-14                                     | SHEET        |                                          |                             |
| CONTACT:                                                          | KATIE WO     | <u> PNSCH</u>                            |                             |
| DATE:                                                             | 05/22/08     |                                          |                             |
| REF. #:                                                           | 000174.8718  | <u>31</u>                                |                             |
| CORP. NAME:                                                       | RHODESIA     | ENTERPRISES, LLC                         |                             |
| ( ) ARTICLES OF INC                                               | ORPORATION   | ( ) ARTICLES OF AMENDMENT                | ( ) ARTICLES OF DISSOLUTION |
| ( ˙ ) ANNUAL REPORT                                               |              | ( ) TRADEMARK/SERVICE MARK               | ( ) FICTITIOUS NAME         |
| ( ) FOREIGN QUALIF                                                | ICATION      | ( ) LIMITED PARTNERSHIP                  | ( XX) LIMITED LIABILITY     |
| ( ) REINSTATEMENT                                                 |              | ( ) MERGER                               | ( ) WITHDRAWAL              |
| ( ) CERTIFICATE OF                                                | CANCELLATION | 1                                        |                             |
| STATE FEES P                                                      | REPAID W     | ITH CHECK# <u>1083</u> FOR \$ <u>155</u> | <u>.00</u>                  |
| AUTHORIZAT                                                        | ION FOR A    | CCOUNT IF TO BE DEBITE                   | D:                          |
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| PLEASE RETU                                                       | RN:          |                                          |                             |
| ( XX ) CERTIFIED C                                                |              | ( ) CERTIFICATE OF GOOD STAN             | DING ( ) PLAIN STAMPED COPY |

Examiner's Initials

#### **ARTICLES OF ORGANIZATION**

RHODESIA ENTERPRISES, LLC, a Florida limited liability company

FILED

08 MAY 22 AM II: 55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

#### ARTICLE I NAME

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

#### RHODESIA ENTERPRISES, LLC

## ARTICLE II PRINCIPAL OFFICE

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

244 Shopping Avenue, PMB 361 Sarasota, Florida 34237

#### ARTICLE III INITIAL REGISTERED AGENT/OFFICE

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

Benjamin R. Hanan 240 South Pineapple Avenue, 10th Floor Sarasota, Florida 34236

### 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 Regulations of the Limited Liability Company.

"MANAGER"

OR MAY 22 AN II: 5:

## 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:

RHODESIA ENTERPRISES, LLC

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

Benjamin R. Hanan 240 South Pineapple Avenue, 10th Floor Sarasota, Florida 34236

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:

Benjamin R. Hanan

"REGISTERED AGENT"

PILED

08 MAY 22 AN II: 56

SECRETARY OF STATE
TALLAHASSEE FLOBINA