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Florida Department of State  
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Division of Corporations  
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## FLORIDA/FOREIGN LIMITED LIABILITY CO.

## LEE FAMILY CAPITAL MANAGEMENT LLC

Certificate of Status	0
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Page Count	04
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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

LEE FAMILY CAPITAL MANAGEMENT LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

**Principal Office Address:**

13 SUNRISE CAY DRIVE

OCEAN REEF

KEY LARGO, FL 33037

**Mailing Address:**

13 SUNRISE CAY DRIVE

OCEAN REEF

KEY LARGO, FL 33037

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

C T Corporation System

Name

1200 South Pine Island Road

Florida street address (P.O. Box **NOT** acceptable)

Plantation FL 33324

City, State, and Zip

*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 as provided for in Chapter 608, F.S.*

C T Corporation System

Carrie Bux

Registered Agent's Signature (REQUIRED)

**CONNIE BRYAN**

**SPECIAL ASSISTANT SECRETARY**

(CONTINUED)

Page 1 of 2

**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

Trust F/B/O Jennifer L. McNamara U/Art. Second(A)  
of Agreement Dated 12/10/05

MGRM

Trust F/B/O Patrick W. Lee U/Art. Third of  
Agreement Dated 12/10/05

MGRM

Trust F/B/O Barbara Rhee U/Art. Third of  
Agreement Dated 12/10/05

MGRM

Trust F/B/O Kelly Caroline McNamara U/Art. Secor  
of Agreement Dated 12/10/05

MGRM

(Use attachment if necessary)

Trust F/B/O Kelly Caroline McNamara U/Art. Second (B)  
of Agreement Dated 12/10/05

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**

  
Signature of a member or an authorized representative of a member.

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

Deborah E. Kalatek, Authorized Representative of All Members

Typed or printed name of signee

**Filing Fees:**

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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LEE FAMILY CAPITAL MANAGEMENT LLC

ARTICLE IV (CONTINUED)

MGRM

TRUST F/B/O JONATHAN PATRICK LEE  
U/ART SECOND (B) OF AGREEMENT DATED  
12/10/05

MGRM

TRUST F/B/O ELIZABETH CLARK RHEE  
U/ART SECOND (B) OF AGREEMENT DATED  
12/10/05

MGRM

TRUST F/B/O ELIZABETH CLARK RHEE U/A  
12/1/94

MGRM

TRUST F/B/O KELLY CAROLINE  
MCNAMARA U/A 4/29/97

MGRM

TRUST F/B/O JONATHAN PATRICK LEE U/A  
5/1/05

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