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08 AUG 22 PM 1:15  
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TALLAHASSEE, FLORIDA

B. KOHR

AUG 22 2008

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 695895 4364659

AUTHORIZATION :

*[Handwritten Signature]*

COST LIMIT : \$ 160,000

ORDER DATE : August 21, 2008

ORDER TIME : 8:22 AM

ORDER NO. : 695895-005

CUSTOMER NO: 4364659

FILED  
08 AUG 22 PM 1:15  
TALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: 1 RUTHERFORD LLC

EFFECTIVE DATE:

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Heather Chapman - EXT. 2908

EXAMINER'S INITIALS: \_\_\_\_\_

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

1 Rutherford 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:**

3450 Buschwood Park Drive, Suite 195

Tampa, FL 33618

**Mailing Address:**

3450 Buschwood Park Drive, Suite 195

Tampa, FL 33618

**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:

CORPORATION SERVICE COMPANY

Name

1201 HAYS STREET

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

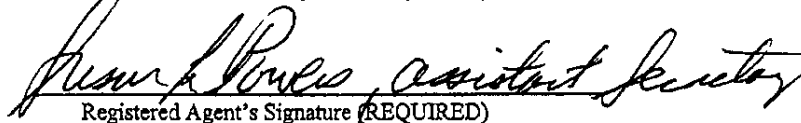
TALLAHASSEE

FL

32301

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.*

  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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**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

Darrell Valenti

3450 Buschwood Park Drive, Suite 195

Tampa, FL 33618

MGRM

Steve Nesbitt

3450 Buschwood Park Drive, Suite 195

Tampa, FL 33618

MGRM

Peter Grant

1775 Moriah Woods Boulevard, Suite 5

Memphis, TN 38117

MGRM

Steven Underwood

1775 Moriah Woods Boulevard, Suite 5


Memphis, TN 38117

(Use attachment if necessary)

**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.)

Steven K. Underwood

Typed or printed name of signer

**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)