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Tor

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GARY, DYTRYCH & RYAN, P.A.

Account Number : I19990000255 Phone

: (561)844-3700

Fax Number

: (561)844-2388

FLORIDA/FOREIGN LIMITED LIABILITY CO.

John C. Bills Properties LLC

Certificate of Status Certified Copy Page Count 03 Estimated Charge \$160.00

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ZIM OCT 27 AM 8: 44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR John C. Bills Properties LLC, a Florida Limited Liability Company

The undersigned, desiring to form a limited liability company under and pursuant to Florida Statute 608 entitled the Florida Limited Liability Company Act, do hereby adopt the following Articles of Organization for such company:

- 1. Name. The name of the limited liability company is: John C, Bills Properties LLC
- 2. The mailing address and the street address of the principal office of this company is: 3950 RCA Bivd., Ste. 5000, Palm Beach Gardens, FL 33410-4265.
- Registered Agent and Office. The name and the Florida street address of the initial registered agent is as follows: <u>Alvs Nagler Daniels at 701 U.S. Hwy. One, Ste., 402, N. Palm Beach,</u> FL 33408.
- 4. Management of Company. The business of the Company is to be managed by managers. The names and addresses of the initial managers are:

<u>Names</u>

<u>Addresses</u>

John Clark Bills

3950 RCA Blvd., Ste. 5000 Paim Beach Gardens, FL 33410-4265

5. Informal Action of Members. Any action of the Members may be taken without a meeting if consent in writing setting forth the action so taken shall be signed by all Members who would be entitled to vote upon such action at a meeting (and filed with the Manager(s) of the Company as part of its records.)

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The undersigned member has hereunto set his hands and seals this 2008.

John Clark Bills, as manager and authorized representative

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

STATE OF FLOCIDA COUNTY OF PALM BEACH

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THE STATE OF FLIN

NOTARY PUBLIC SERIAL NO.: DD 695396

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REGISTERED AGENT ACCEPTANCE

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

Alys Nagler Daniels

STATE OF FLORIDA COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me this 2^{4} day of $0c^{4}bec$, 2008, by Alys Nagler Daniels, who is personally known to me or who has produced ______ as identification.

NOTARY-PUBL SERIAL NO.:

F:\DOC\$\ALY\$\and5211.lic.wpd

NANCY S. JONES
MY COMMISSION # DD 746739
EXPIRES: January 13, 2012
Bonded This Notary Public Underwiters

MOCT 27 AM 8: 45
ECRETARY OF STATE
LAHASSEE, FLORIDA

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