Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000279344 3)))



H080002793443ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : GRAY ROBINSON, P.A.

Account Number : I2000000092

: (863)284-2200

Fax Number : (863)688-9771

FLORIDA/FOREIGN LIMITED LIABILITY CO.

ADP OF POLK, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

H08000279344 3

ARTICLES OF ORGANIZATION

OF

ADP OF POLK, LLC

The undersigned hereby presents these Articles of Organization for the formation of a Limited Liability Company pursuant to the Florida Limited Liability Company Act.

ARTICLE I

<u>NAME</u>

The name of the Limited Liability Company is ADP OF POLK, LLC.

ARTICLE II

PRINCIPAL OFFICE

The mailing address of the principal office of the Limited Liability Company is 1216 Jefferson Drive, Lakeland, Florida 33803, and the street address of the principal office of the Limited Liability Company is 1216 Jefferson Drive, Lakeland, Florida 33803.

ARTICLE III

DURATION

The Limited Liability Company shall have perpetual existence, commencing on the date of the filing of these Articles of Organization.

ARTICLE IV

PURPOSE

The Limited Liability Company is organized for the purpose of transacting any and all lawful business.

H08000279344 3

H08000279344 3

ARTICLE V

MANAGEMENT

The Limited Liability Company is to be manager-managed. The names and addresses of the Initial Managers are:

Gregory A. Masters 1216 Jefferson Drive Lakeland, Florida 33803

ARTICLE VI

INITIAL REGISTERED OFFICE AND INITIAL REGISTERED AGENT

The street address of the initial registered office of the Limited Liability Company's 1216 Jefferson Drive, Lakeland, Florida 33803, and the name of the initial registered agent of the Limited Liability Company at that office is Gregory A. Masters.

ARTICLE VII

INDEMNIFICATION

Except to the extent otherwise provided in the Operating Agreement of the Limited Liability Company, the Limited Liability Company shall indemnify each person or entity who was or is a Member, director, officer, employee or agent of the Limited Liability Company to the full extent permitted by law.

IN WITNESS WHEREOF, the undersigned, being an authorized representative of the Initial Managers, has executed these Articles of Organization this 23 for December, 2008.

GREGORY A. MASTERS

H08000279344 3

H08000279344 3

CERTIFICATE OF DESIGNATION

OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 AND SECTION 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE REGISTERED THE FOLLOWING STATEMENT IN DESIGNATING AGENT/REGISTERED OFFICE IN THE STATE OF FLORIDA:

- 1. The name of the Limited Liability Company is ADP OF POLK, LLC.
- 2. The name and street address of its initial Registered Agent and initial Registered Office are:

GREGORY A. MASTERS 1216 Jefferson Drive Lakeland, Florida 33803

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.

GREGORY A. MASTERS

Date: December __ Z3

H08000279344 3